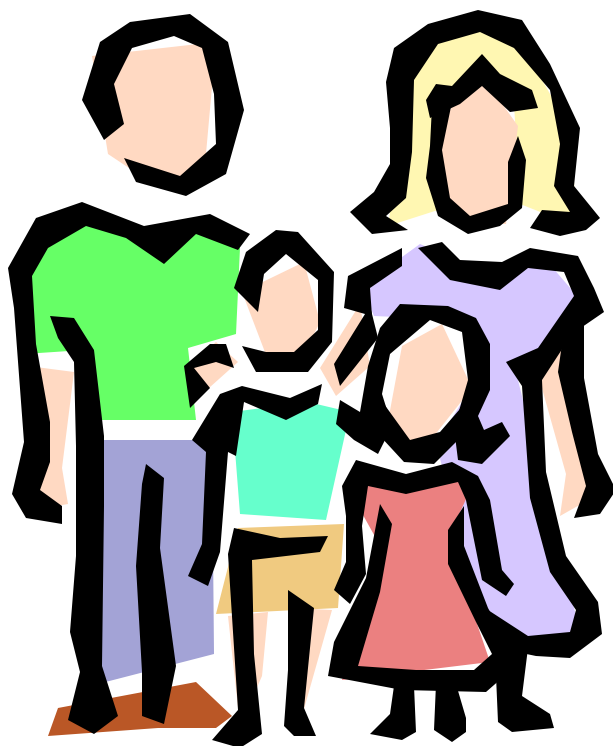


FM-0

FM-00

FM-12



July 2002

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1931
FAMILY
MEDICAID
***FM-O**

Volume III F Section 303

Clarification of Terms

Program

PACMIS Program

1931 Family Medicaid

FM-O

1931 FM-O with a 12 Month Earned Income Disregard

FM-O-O

FEP

AF

FEP-TP

AF-WP

FEP Diversion

AF Denial of DO, DC or DS*

*If case history shows an AF denial using DO, DC or DS, it counts as 3 AF months beginning with the month of the FEP Diversion denial. (Example: when calculating eligibility for the \$30 & 1/3 disregard, and the FEP diversion denial was in the month of June; it counts the individuals included in the household during the diversion month as receiving FEP (or AF) in the months of June, July and August.)

Introduction

Under the old Aid to Families with Dependent Children (AFDC) program, families automatically received Medicaid coverage when they qualified for cash assistance. The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) replaced the AFDC program with Temporary Assistance for Needy Families (TANF) programs and ended the automatic link between eligibility for cash assistance and eligibility for Medicaid.

Section 1931 of the Social Security Act was passed to insure that low income families that were affected by this change did not lose Medicaid benefits. Under Section 1931, states must provide Medicaid coverage to families that would have been eligible for benefits under the old AFDC criteria. To comply with this requirement, the 1931 Family Medicaid program was implemented effective November 1, 1999.

It is important that workers determine eligibility under this program for households that meet certain criteria before looking at eligibility under any other Medicaid program.

This is because these households may qualify to have all earned income disregarded for 12 months for 1931 FM and then receive an additional 12 months of coverage under Transitional Medicaid when they lose eligibility for 1931 FM (FM-O) due to earned income of a parent.

Who is Eligible for 1931 Family Medicaid?

Parents and children living together or children living with non-parent specified relative. To qualify for 1931 Family Medicaid the household must:

- T** Have at least one age eligible child living in their home who is deprived of parental support;
- T** Have assets that are less than the Medicaid asset limits;
- T** Pass two income tests.

Additional Benefits For 1931 Family Medicaid Households:

4 Month Transitional Medicaid

1931 Family Medicaid households who lose eligibility because of increased child support or alimony may be eligible for 4 Month Transitional Medicaid.

12 Month Earned Income Disregard

1931 Family Medicaid households, who would otherwise lose eligibility because of the earned income of a parent, may qualify to have all earned income of the parent(s) disregarded for up to 12 months.

12 Month Transitional Medicaid

1931 Family Medicaid households that have exhausted the 12 month earned income disregard or who do not qualify for the 12 month earned income disregard for certain reasons may be eligible for 12 Month Transitional Medical.

1931 Family Medicaid

Eligibility

Determine 1931 Family Medicaid(FM-O) eligibility before determining eligibility for any other Medicaid programs for households that meet the following criteria:

- There is an age eligible child in the household.
- The child is deprived of parental support.
- The child lives with a parent or non-parent specified relative.

If the household does not qualify for 1931 FM, determine eligibility for any other medical assistance programs for which any household members may be eligible.

Age Eligible Child

To be considered an age eligible child, a child must be under age 18 OR between the ages of 18 and 19 if s/he is:

1. A full time student participating in a program of secondary school or equivalent level of vocational or technical training, AND
2. Expects to complete that educational program before reaching age 19. An 18-year-old full-time student who expects to complete the educational program before reaching age 19 continues to meet the age requirement through the month in which s/he completes the educational program.
3. If there are no other children in the home who meet age requirements, an unborn child will be considered an 'age eligible child' if the mother is in the third trimester of pregnancy. (The unborn will not count in the household size.)

Deprivation of Support

Vol IIIF Section 303-6

To be eligible for 1931 Family Medicaid, a child must be deprived of parental support for one of the following reasons:

- Ž At least one parent is deceased.
- Ž At least one parent is absent from the home.
- Ž At least one parent in a two parent household is incapacitated or disabled.
- Ž The parent who is the primary wage earner in a two parent household is unemployed or employed less than 100 hours per month.

Who is a Specified Relative

The following relationships meet the definition of specified relative:

1. Parents and stepparents.
2. Grandfather and grandmother.
3. Brother or sister including step, half or adopted brother or sister.
4. Uncle or aunt.
5. First cousin or cousin once removed.
6. Nephew or niece.
7. Persons of prior generations designated by the prefix grand, great, great-great, or great-great-great.
8. Spouses or former spouses of any person listed above.

Who Must Be Included in the Household?

The following household members **MUST** be included:



1. All parents and/or stepparents who are still married to the natural parent.
2. All brothers, sisters, half-brothers, half-sisters, adopted brothers and adopted sisters who meet the age requirements. **The caretaker relative does not have the option to exclude a child.**

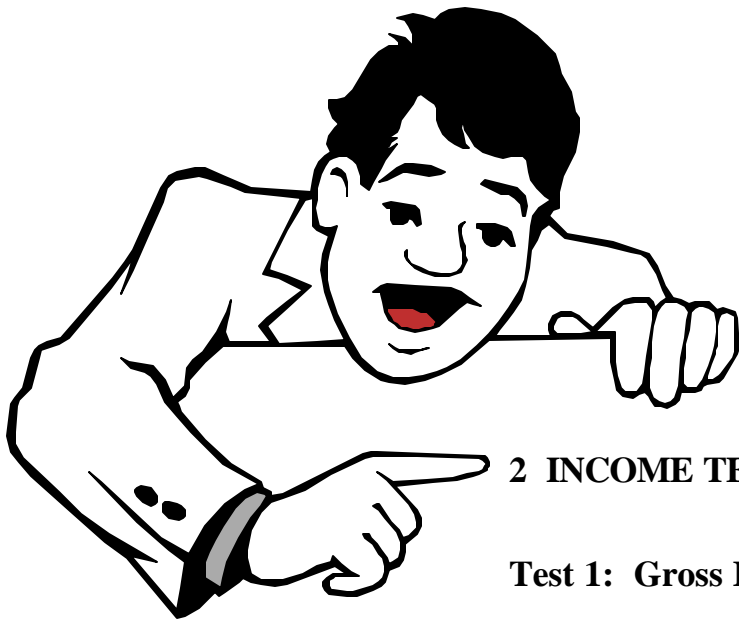
Special Circumstances:

- ? Do not include any **PARENT or CHILD** who receives SSI. (*SEPA code 'SS'.*)
- ? A stepparent who is no longer married to the natural parent may decide whether or not to include a stepchild if the natural parent does not live in the home. This is because the stepchild has no blood relationship to the stepparent's dependent children.
- ? Do not include a child who receives Federal, State, or Local government adoption assistance unless leaving the child off makes the household ineligible for 1931 FM. The child must be coded 'IN' on both FM-O and SA in order to allow the parents or caretaker relatives to be included.
- ? A parent or child is still considered to be living in the household during temporary absences from the home for purposes of schooling, visits, hospitalization, etc.
- ? An unborn child is not included the household size. (*SEPA code 'OU' until 3rd trimester; SEPA code 'IN' during 3rd trimester.*)

Income Determination

Consider all non-excluded household income expected to be received in the month for which you are determining eligibility.

A household must pass **2 income tests** to qualify for 1931 Family Medicaid.



2 INCOME TESTS

Test 1: Gross Income Test

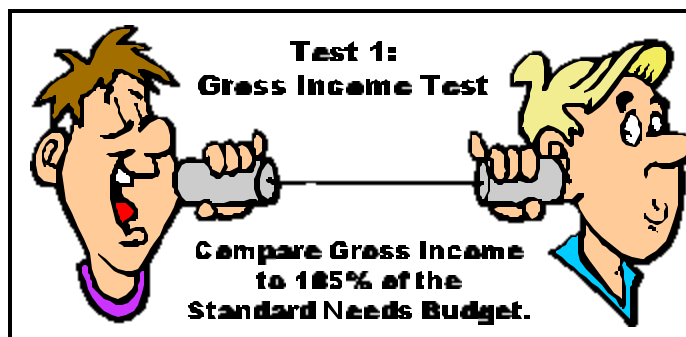
Test 2: Net Income Standard Test

THE HOUSEHOLD MUST PASS BOTH INCOME TESTS TO BE ELIGIBLE.

Income Tests

Gross Income Test

NO INCOME DISREGARDS ARE ALLOWED FOR THE GROSS INCOME TEST.



The 1931 Gross Income Test is based on 185% of the Standard Needs Budget for the household size. A household's gross countable income must be equal to or less than Gross Income Limit for the household size from Table XI.

Follow These Steps:

1. Total the earned and unearned income of each person included in the household that is not excluded under sections 403 and 405, with one exception:

The earned income of a dependent child is countable in the Gross Test.

2. Compare the remaining income to the Gross Income Limit from Table XI for the eligible household size.
 - ? If the household income is more than the Gross Income Limit from Table XI, the household does not meet the income requirements and the household is not eligible for 1931 Family Medicaid. Determine if household members meet eligibility for any other Medicaid programs.
 - ? If the household income is less than or equal to the Gross Income Limit from Table XI, proceed to Test 2.

Note: The **earned** income of the parents is not counted in the gross or net test for households that qualify for the 12 month earned income disregard (FM-OO).

**If the Household
Passes the Gross
Income Test,
Continue to the
Net Standard
Income Test.**

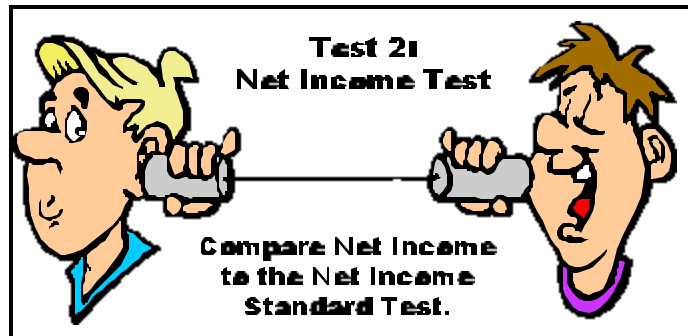
Net Income Standard Test

For the Net Income Standard Test, certain earned income disregards are allowed from each individual's earned income.

An individual is not eligible for **any** earned income disregards if:

1. The person voluntarily quit work or reduced hours within the previous 30 days without good cause.
2. The person refused to accept a bona-fide offer of employment in the previous 30 days without good cause.

Good cause reasons include: lack of adequate child care; lack of transportation; illness of a household member or special medical care needed for a household member; the individual accepted a better job; the individual was the victim of discrimination or sexual harassment on the job; the job was dangerous; the cost of maintaining employment was greater than the wages; or any other condition which would limit the individual's ability to maintain employment.



To pass the Net Income Standard Test, the household's net countable income must be equal to or less than the Net Need Standard for the household size listed on Table XI.

Follow These Steps:

If the household does not have earned income, skip to step 3.

1. Compute the household's gross earned income that is not excluded under section 405. **The earned income of a child does not count in the Net Income Test if the child meets the requirements in Section 405-4 #5.** (Use code 'DC' with subtype '19' on the EAIN screen if the child meets these requirements. PACMIS will count the income in the Gross Test but not in the Net Test. Use code 'DC NS' or 'WA' if s/he does not meet the requirements and PACMIS will count the income for both the Gross Test and the Net Test.
2. Subtract the appropriate disregards from the countable gross earned income of each employed individual. These disregards must be allowed in the following order:
 - A. **\$90 Work Expense Allowance**
Allow a \$90 work expense allowance for each employed person in the household. If the earned income of an individual is less than \$90, the total amount of earned income is disregarded.
 - B. **\$30 and 1/3 Disregard**
Deduct \$30 and 1/3 of the remainder from each employed person's earned income if the wage earner has received Utah 1931 Medicaid (FM-O), or a FEP or FEP-TP or FEP Diversion payment in one of the previous 4 months and has not exhausted the 30 1/3 disregard. Allow this disregard for 4 consecutive months. Allow the \$30 disregard for 8 consecutive calendar months beginning with the first month after the fourth month of the \$30 and 1/3 disregard is allowed. Count all months in which the wage earner is allowed the \$30 and 1/3 disregard or the \$30 disregard on any family related Medicaid program.
 - C. **Dependent Care Costs Necessary for Employment**
Deduct the costs of dependent care (up to the allowable maximum) paid by a member of the 1931 Medicaid household, or by someone who would be included except the person receives SSI, which are necessary to maintain employment. The dependent care costs may be for a child or an adult who is included in the household and must be verified. Do not allow the expense if it is paid to a person included in the household.

This figure is the household's NET COUNTABLE EARNED INCOME.

3. Compute the household's total countable unearned income that is not excluded under section 403.
 - L. Reminder: PACMIS will disregard the first \$50 of the total current monthly child support and/or alimony received by the household.

This figure is the household's TOTAL COUNTABLE UNEARNED INCOME.

4. Add the countable earned income (from step 2) and the countable unearned income (from step 3). **This total is a household's Countable Net Income.**
5. Compare the Net Income (from step 4), to the Net Income Standard limit for the household size from Table XI.
6. If the net income is GREATER than the Net Income Limit, the household does not meet the income criteria and is not eligible for 1931 Family Medicaid. Determine if household members meet eligibility for any other Medicaid programs.
7. If the net income is less than or equal to the Net Income limit, the household meets income criteria



for 1931 Family Medicaid.

If the household passes both income tests and meets all other 1931 Family Medicaid requirements (ie: asset test, deprivation, etc.) the household is eligible for 1931 Family Medicaid for that month.

If the case is already open for another program, go to APMA, if not, go to REAP. Register program type: FM

Coverage Grp: Blank

You cannot add the O to an open FM program. Close the program appropriately then open an FM-O.

```

REAP                                REGISTER APPLICATION                                25JUN02 09:37
                                         HEALTH T
CASE NAME:                          CASE NUMBER: 00009428
PRIMARY DEPT/REG/OFF: HHH TEAM: 1 CASELOAD: 01 TRAINING, HEALTH
DRUG/ALCOHOL REHAB:  N
EXPEDITED F.S:      1           2           3           4           5           6
PROGRAMS APPLIED FOR: FM  _____  _____  _____  _____  _____  _____
APP RECEIVED DATE:   15JUN02  _____  _____  _____  _____  _____  _____
BEN EFFECTIVE DATE:  01JUN02  _____  _____  _____  _____  _____  _____
MEDICAID CATEGORY:   Q           -           -           -           -           -
MEDICAID COVERAGE GRP:
  CLIENT NAME                DOB                S.S.N                SEX    REL    APP POS
QUE, SUSIE                  F              F              F      PI      01
QUE, MARK                   N              N              N      CH      02

```

Closing an FM-O

When household changes cause the household to become ineligible for the FM-O program, the reason for closure will determine how to effect the closure of the program.

Closure Reasons

- L** **Earned Income Under 185% of Poverty** - When the earned income of a parent causes the household to fail eligibility for FM-O and the household would otherwise be eligible, there is a possibility of continued coverage under FM-O by excluding the parent's earned income. This is known as FM-OO or the Earned Income Disregard. Close FM-O 'FO'. For more information on FM-OO see Section 2. (Vol IIIF, Section 409-3)
- L** **Earned Income Over 185% of Poverty** - When the FM-O household loses eligibility for FM-O because the earned income of the parent exceeds 185% of poverty, the household is not eligible for the earned income disregard (FM-OO). They may be eligible for 12 month Transitional Medicaid. Close the FM-O 'TR'. For more information on TR see Section 3. (Vol IIIF, Section 309)
- L** **Hours of employment of the primary wage earner in a two parent household exceeds 100 hours per month and the deprivation reason is unemployment or underemployment of the primary wage earner.** If there is no other deprivation, look at TR.
- L** **The loss of the time limited \$30 and 1/3 income disregards for a family member and at least one household member has received 1931 FM-O or FEP in at least 3 out of the last 6 months, the household may be eligible for TR.**
- L** **Child Support or Alimony** - When the FM-O household loses eligibility because the receipt of child support or alimony exceeds the income limit and the household has 1931, FEP, or Diversion for 3 out of the last 6 months, look at 4 month Transitional Medicaid. Close the FM-O 'CS'. (See Vol. IIIF, Section 308.
- L** **Other Reasons** - When the household loses eligibility and is not eligible for 4 month, the Earned Income Disregard, or TR; look at eligibility under other Medicaid programs.

Section 2

FM-00

Twelve Month Earned Income Disregard for 1931 FM-O “FM-OO Medicaid”

Section 409-3

FM-OO is not a program type, it is an FM-O income disregard. The 2nd O is a PACMIS coverage code which tells PACMIS to disregard the parent's income. Households that qualify for the FM-OO Medicaid program are eligible for the parental earned income disregard for up to 12 months. (The Medicaid coverage can be less than 12 months if the household does not continue to meet FM-OO requirements.)

To be eligible for FM-OO Medicaid, the household must have:

1. Received:
 - A. Family Employment Program (FEP, AF program type), or
 - B. Family Employment Program (FEP-TP, AF WP program type)
 - C. Diversion with Medicaid, or
 - D. 1931 FM-O MedicaidAND
2. The earned income of the parent plays a role in making the household ineligible;
AND
3. Best estimate of gross earnings of the parent is under 185% of Poverty for their household size;
AND
4. Would meet all other factors of eligibility for FM-O (except the FM-OO income criteria).

If the household does not qualify for the 12 month income disregard (FM-OO) Medicaid, look at eligibility for Transitional Medicaid or other Medicaid programs.

FM-OO Criteria

When a change occurs, follow the steps below.

Step 1: **Make all the changes in PACMIS. Does the household still pass eligibility requirements for the current program?**

If the answer is yes, leave the program open.

If the answer is no, go to Step 2.

Step 2: **Did the household receive FEP, FEP-TP, Diversion with Medicaid, or FM-O in the month prior to the month they lost eligibility?**

L The household must have received benefits from one of these programs and the case is now closing. The household cannot receive FM-OO on a denied application.

L There is no minimum number of months the household received FEP, FEP-TP, or FM-O to qualify for FM-OO Medicaid.

Example: A FM-O case is approved in August. The single parent starts a new job and the household becomes ineligible for FM-O in September because of their earned income.

FM-O with the earned income disregard (FM-OO) would start in September.

L If the household received a FEP Diversion payment, FM-OO Medicaid starts the first month after the 3-month diversion period.

Example: Household applies and receives Diversion in January. The Diversion months are January, February, and March.

FM-O with the earned income disregard (FM-OO) would start in April.

If the answer is yes, go to Step 3.

If the answer is no, the household is not eligible for FM-OO.



Step 3: Does deprivation still exist?

If deprivation does not exist, the household is not eligible for FM-OO, look at TR.
If deprivation does exist continue to Step 4.

Step 4: Do the parents have earned income?

If the answer is yes, go to step 4.
If the answer is no, there is no eligibility for the earned income disregard (FM-OO) or the twelve month extended Medicaid (FM-12).

If child support caused the income to exceed the limit, the household may be eligible for 4 month extended Medicaid.

Step 5: Did the earned income of the parent play a role in failing eligibility for the program?

It must be the parent's (or caretaker relative's) income that played a role in failing eligibility for the program. If it is the earned income of a child that causes the case to close, the household is not eligible for FM-OO Medicaid.

The earned income does not have to increase.

To determine if the parent's earned income is playing a role in failing eligibility, change the earned income code on EAIN to 'OE'. Pass through the FMGI and FMIE screens. If the household passes the income tests with the parent's income exempted, the earned income played a role in failing the income test for the program.

Example 1:

Harriet Nelson has been receiving FM-O for her household for the last year. She has been working part time at the Ice Cream Store.

She is now working full time and based on her new wages she is no longer eligible for FM-O.

The household would be eligible for FM-OO Medicaid because the earned income of a parent played a role in why they were no longer eligible for FM-O.

Example 2:

Mrs. Cleaver has been receiving FM-O for the last year. She works part time at the library. There is no change in her hours of employment or wages. They were just approved to receive Social Security death benefits.

Based on the earned income (wages) and unearned income (SSA) the household is no longer eligible for FM-O because the income is too high.

To determine if the household is eligible for FM-OO Medicaid, we must decide if the earned income played a role in the case ineligibility.

To determine if earned income played a role in the case closure:

Look at eligibility using the Social Security income only (not the earned income of the parent):

A. If the household is not eligible based only on the Social Security income:

The earned income did not play a role in the case closure.

; The household would not be eligible for FM-OO Medicaid because earned income did not play a role in the closure (the closure was due to the SSA income only).

B. If the household is eligible for FM-O based only on the Social Security income:

The earned income was a factor in the case closure.

(The household would be eligible for FM-OO Medicaid because the earned income played a role in the ineligibility of the case.

If the parent's earned income played a role in failing eligibility, then go to step 6.

If the parent's earned income did not play a role, the household is not eligible for FM-OO or TR.

Step 6: Are the parent's earnings under 185% of poverty?

After the FEP, FEP-TP, Diversion, or FM-O case has closed, to be eligible for FM-OO Medicaid, the best estimate of the parent's earnings must be under 185% of Poverty.

T Do a best estimate of the parent's gross earned income.

P Post the parent's earned income on FMIC.

P Enter the household size on FMIC.

P Compare the parent's gross earned income to the 185% of Poverty on FMIC. Do not allow any deductions. Only use the parent's gross earned income. Do not include their unearned income and do not use any income of a child.

(If the gross earned income is under 185% of Poverty, for the household size, proceed to Test 2.

; If the gross earned income is over 185% of Poverty, the household is not eligible for FM-OO Medicaid. Look at eligibility for Transitional Medicaid (TR).

If the household passes the 185% test, go to Step 7.

If the household does not pass the 185% test, look at TR.

Step 7: Does the household pass Income Test 2 with the parent's earned income disregarded?

PACMIS will use the parent's unearned income and the rest of the household's earned and unearned income to complete test 2. The income must be under the FM-O Gross and Net Tests.

If the household meets these income requirements, then the household is eligible for the earned income disregard (FM-OO). **FM-OO is FM-O with an earned income disregard.** Changes in the parent's earned income during the first six months do not affect eligibility.

If the household does not meet the income requirements, the household is not eligible for the earned income disregard. Look at TR.

PACMIS Procedures to Open Extended FM-O Medicaid (FM-O-O)

Once you have determined that the household is eligible for the FM-OO Medicaid, follow the steps below to open FM-OO.

1. If the household is no longer eligible for FEP, FEP-TP, FM-O, or Diversion and is now eligible for FM-OO Medicaid, close the case FEP, FEP-TP, or FM-O case.
 Closure code to give Extended FM-OO: FO

2. Send appropriate closure notice
 AF closure code: FCFO
 FM-O closure code: Closure and approval of FM-OO are the same.

3. Register new FM-O-O program
 (Use APMA if adding FM-O-O to a case that has other programs open)
 (Use CLIR ÷ REAP if FM-O-O is the only program to be opened)
 Program type: FM
 Medicaid category: O
 Medicaid coverage group: O

 Note: You must enter the category and coverage group when registering the program.

 If you forget to make these entries on APMA or REAP, DECA your case and start over. (If you add the category or coverage group code on SEPA later, it will cause problems on the case.)

4. Go through appropriate screens and authorize benefits on FMIE.
 CAP2 and SEPA Will show a category type and coverage type as O
 ETRC Will have a field "FMO-O Medical in ____"
 FMGI and FMIE Will disregard the earned income of the parent
 FMIE Set a 12 month review

5. Send approval notice for the Extended FM-OO program.
 Notice: MAFO (See page 38)

Example: Changing FM-O to FM-OO

Case is currently open for FM-O



CAP2		CASE PROFILE - PAGE 2						06AUG01 13:46			
								ELIG 1			
CASE NAME: MAAS, STEPHEN						CASE NUMBER: 00007886 MONTH: JAN01					
PROGRAM	CVG	PRG	HH	BENEFIT	APP	PROG	STATUS	CL	REV	CUR	
TYP/SUB	CAT	GRP	ALT	SZ	EFF DAT	RECEIVE	STATUS	DATE	DE	QUE	
CC					10OCT00	10OCT00	DENIED	10OCT00	RC	JUN01	
FM	O				01OCT00	10OCT00	OPEN	05MAR01		JUN01	
										JAN01	
CLIENT		CLIENT ID		DOB		PER		PROGRAM TYPE			
NAME		SSN		AGE		REL SEX		ALT FM			
MAAS, STEPHEN		070044986		05MAY1975		PI M		IN			
		746-B4-8944		026							
MAAS, DUSTIN		080044986		06JUN1999		CH M		IN			
		746-B4-8945		002							
VIEW PRIOR MONTH CLIENT INFO (MNMYY):										NEXT-->	
1 DWS		204.113.16.53		TA2699		S					

FMED		FM - ELIGIBILITY DETERMINATION		06AUG01 13:48	
CASE NAME: MAAS, STEPHEN		ELIG 1			
ELIGIBILITY FACTOR		HOUSE-HOLD		CASE NUMBER: 00007886 MONTH: JAN01	
		INDIVIDUALS			
		IN STEPH M	IN DUSTI M		
RESIDENCY	PASS	PASS	PASS		
CITIZENSHIP	PASS	PASS	PASS		
SOCIAL SECURITY	PASS	PASS	PASS		
CLIENT AGE	PASS	FAIL	PASS		
DEPRIVATION	PASS	PASS	PASS		
DOS-COOP	PASS	PASS	????		
TPL CO-DPER	PASS	N/A	N/A		
RESOURCES	PASS	N/A	N/A		
GROSS INCOME	PASS	N/A	N/A		
INCOME	PASS	N/A	N/A		

INELIGIBILITY DATE : _____

DENIAL CLOSURE REASON: FO AUTHORIZE: y MORE FACTORS: _ MORE CLIENTS: _

PASSED - ELIGIBLE FOR BENEFITS NEXT--> _____

1 DWS 204.113.16.53 TA2699 8

To close the FM-O and start the FM-OO case, use the closure code of FO on 'ED' screen.

AF screen	AFED
FM-O screen	FMED

Send the appropriate closure notice.

AF closure notice	FCFO
FM-O closure notice	MAFO

CAP2		CASE PROFILE - PAGE 2				06AUG01 13:49			
						ELIG 1			
CASE NAME: MAAS, STEPHEN				CASE NUMBER: 00007885				MONTH: JAN01	

PROGRAM	CVG	PRG	HH	BENEFIT	APP	PROG	STATUS	CL	REV	CUR
TYP/SUB	CAT	GAP	ALT	SZ	EFF DAT	RECEIVE	STATUS	DATE	DE	DUE
CC					10OCT00	10OCT00	DENIED	10OCT00	RC	JUN01
FM	D				01OCT00	10OCT00	CLOSED	31DEC00	FD	JUN01

CLIENT	CLIENT ID	DOB	PER	PROGRAM TYPE
NAME	SSN	AGE	REL SEX	ALT
MAAS, STEPHEN	070044936	05MAY1975	PI M	FM
	745-84-8944	026		IN
MAAS, DUSTIN	080044936	06JUN1999	CH M	IN
	745-84-8945	002		

VIEW PRIOR MONTH CLIENT INFO (MMYY):				NEXT-->
1 DWS	204.113.16.53	TA2699	5	

CAP2 shows that the FM-O case is closed.

REAP		REGISTER APPLICATION		06AUG01 13:57	
				ELIG 1	
CASE NAME: MAAS, STEPHEN		CASE NUMBER: 00007886			
PRIMARY DEPT/REG/OFF: 999		TEAM: 1		CASELOAD: 01 GREEN, KELVIN P	
DRUG/ALCOHOL REHAB: N					
EXPEDITED F.S:	1	2	3	4	5
PROGRAMS APPLIED FOR: fm	---	---	---	---	---
APP RECEIVED DATE:	01jan01	---	---	---	---
BEN EFFECTIVE DATE:	---	---	---	---	---
MEDICAID CATEGORY:	0	---	---	---	---
MEDICAID COVERAGE GRP:	0	---	---	---	---
CLIENT NAME	DOB	S.S.N	SEX	REL	APP POS
MAAS, STEPHEN	05MAY1975	746 84 8944	M	PI	01
MAAS, DUSTIN	06JUN1999	746 84 8945	M	ch	02
ADDRESS INFORMATION TO BE ENTERED? : Y					
10	1 DWS	204.113.16.53	TA2699	8	

To open a FM-OO case, use either CLIR or APMA:

- A. CLIR Use when all programs are closed.
 1. Select Function # "Register Case with Existing Case Number".
 2. On the REAP screen
 - < Add the FM Program with:
 - Medicaid Category of O, and
 - Medicaid Coverage Group of O.
 3. Complete remaining registration screens.
- B. APMA Use when adding FM-OO to a case that has other programs open.
 - < Add the FM Program with:
 - Medicaid Category of O, and
 - Medicaid Coverage Group of O.

CAP2

CASE PROFILE - PAGE 2

06AUG01 13:58


ELIG 1

CASE NAME: MAAS, STEPHEN

CASE NUMBER: 00007886 MONTH: JAN01

PROGRAM TYP/SUB	CVG CAT	PRG GRP	HH ALT	BENEFIT SZ	EFF DAT	APP RECEIVE	PROG STATUS	STATUS DATE	CL DE	REV DUE	CUR MON
CC					10OCT00	10OCT00	DENIED	10OCT00	RC		DCT00
FM	0	0			01JAN01	01JAN01	REC'D	01JAN01			JAN01

CLIENT NAME	CLIENT ID SSN	DOB AGE	REL	SEX	PER ALT	PROGRAM TYPE FM
MAAS, STEPHEN	070044986	05MAY1975	PI	M		CO
	746-84-8944	026				
MAAS, DUSTIN	080044986	06JUN1999	CH	M		CO
	746-84-8945	002				



CAP1 will show the FM-OO case in "Received Status".

Go through appropriate screens, starting with SEPA and enter appropriate codes.

```

SEPA                                SETUP PARTICIPATIONS                    06AUG01 14:00
                                     ELIG 1
CASE NAME: MAAS, STEPHEN           CASE NUMBER: 00007886 MONTH: JAN01
      PGH CAT/   START INELG INELG   PGH CAT/   START INELG INELG
NAME  REL  SUB  COV PART DAY  RSN  DATE      SUB  COV PART DAY  RSN  DATE
01 STEPH H  PI FM    0 0  IN   1   -   -
02 DUSTI H  CH FM    0 0  IN   1   -   -

SPECIAL PROJECT INDICATOR--> FM
HH TAX DEP:      MORE PROGRAMS:      MORE CLIENTS:      NEXT-->
40 1 DWS      204.113.16.53      TA2699      8

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ETRC will have the field "FM-O-O Medical In". This field indicates which extended month of the FM-OO is in.

```

ETRC      ETHNIC / RESIDENCY / CITIZENSHIP / IDENTITY / SCHDDL 06AUG01 14:01
                                     ELIG 1
CASE NAME: MAAS, STEPHEN           CASE NUMBER: 00007886
ID: Y VR: HC HH LANGUAGE CODE: en TPL: 1 DATE: 10OCT00 UH TPL: DATE:
      FM-O-O MEDICAL IN:      1 SCH SCH FS      OTH      CAAL
NAME  REL  ETH CIT VR  RES VR  CODE ST  EX  VR      INS      DATE
01 STEPH M  PI  WH  US  CS  RE  H  NOT  NA  -  CS      -
02 DUSTI M  CH  WH  US  CS  RE  H  NOT  NA  -  CS      -

                                     MORE CLIENT:      NEXT-->
40 1 DWS      204.113.16.53      TA2699      8

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FMGI                                1931 FM GROSS INCOME TEST                06AUG01 14:04
                                      PROSPECTIVE                        ELIG 1
CASE NAME: NAAS, STEPHEN             CASE NUMBER: 00007886  MONTH: JAN01
HOUSEHOLD SIZE: 02

- EMPLOYMENT INCOME      :      0.00  - DEEMED INCOME          :      0.00
- SELF EMPLOYMENT INCOME :      0.00  - OTHER UNEARNED INCOME :     150.00
  TOTAL EARNED           :      0.00  TOTAL UNEARNED         :     150.00

                                      TOTAL COUNTABLE INCOME:     150.00
                                      GROSS INCOME TEST AMT :     866.00

CASE HAS PASSED THE GROSS INCOME TEST                                NEXT--> █
1A █ 1 DWS 204,113.16.53 TA2699 8

```

The first income test is the FMGI screen.

Parent's income: Earned income is disregarded.
 Unearned income is counted.

Other household member's income: Earned and unearned income is counted.

The second income test is the FMIE screen.

FMIE	1931 MEDICAID INCOME ELIGIBILITY	23AUG01 14:09
		ELIG 1
CASE NAME: MAAS, STEPHEN	CASE NUMBER: 00007886	MONTH: JAN01
HOUSEHOLD SIZE: 02		
EMPLOYMENT INCOME :	0.00	
SELF EMPLOYMENT INCOME :	0.00	UNEARNED INCOME : 150.00
TOTAL EARNED :	0.00	
		COUNTABLE INCOME : 150.00
WORK ALLOWANCE :	0.00	
30 + 1/3 DISREGARD :	0.00	1931 FM INCOME LIMIT : 468.00
\$30 DISREGARD :	0.00	
DEP CARE DEDUCTION :	0.00	
TOTAL DEDUCTIONS :	0.00	
PAYMENT AUTHORIZATION: 1111		
ISS REAS: IN ISSUANCE INDICATOR: NO		
REVIEW DUE DATE: DEC01 BUS PASS: N		
HOLD REMINDER DATE:		
HOLD REASON:		
IS ELIGIBLE AUTHORIZATION REQUIRED PAYEE SETUP REQ: N		
NEXT-->		
10	1 DWS 204.113.16.53	TA2299 \$

Parent's income:

Earned income is disregarded.
Unearned income is counted.

Other household member's income:

Earned and unearned income is counted.

Authorize the FM-OO on the FMIE screen.

Set a 12 month review date.

Send appropriate notices.

PACMIS will automatically send out a review in Month 5 which will be due on the first day of Month 6. PACMIS knows when to send out the Review based on the "FM-OO" field on the ETRC screen.

Continued Eligibility for FM-OO

Remember, the household must continue to be eligible for FM-O in each month of the FM-OO Medicaid.

- A. The eligible child in the home must be deprived of parental support.
- B. The household must continue to live in Utah.
- C. The household must meet reporting requirements.
- D. The household meet FM-O income requirements (excluding the parent's earned income). Changes in anyone's unearned income or a child's earned or unearned income could cause the household to become ineligible for FM-OO.
- E.

At the review, the household must pass 2 tests:

Test 1: Gross test using parent's earned income only.

Test 2: Net Test counting all household member's earned and unearned income
EXCEPT the parent's earned income.

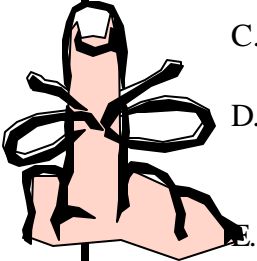
Duty of Support Requirements and FM-OO Medicaid

Duty of support requirements apply while the household is receiving FM-OO Medicaid.

Medicaid rules indicate that if a parent who had been required to comply with Duty of Support requirements does not comply, he will be removed from the Medicaid coverage and his income will count for FM-O eligibility. *He should be coded as DI on SEPA.*

If the FM-O case closes, and the household is eligible for FM-OO Medicaid, the parent who was not cooperating with ORS cannot be included in the FM-OO coverage. **However, his income will still be disregarded for up to 12 months.**

If they do not meet the eligibility requirements in any of the months, close the FM-OO Medicaid. Look at any other medical programs the family be eligible for including TR.



Reporting Periods

First Six Months

Once the FM-OO case has been opened, changes in the earned income of the parents for the first six month period does not affect eligibility.

The household must continue to report changes and meet other FM-O eligibility in each month.

Question:

Ginger has been receiving FM-OO since January. On March 5th she reported that she got a new job and is now earning \$25 per hour. Based on her best estimate of wages, her earnings are over 185% of Poverty.

What action should we take?

Answer:

Keep the FM-OO open until we process the FM-OO Review.

This is because changes in the earned income of the parent during the first six month period do not affect eligibility for the FM-OO program. For FM-OO the household must only pass the 185% in Month 1 and Month 7.

Note: PACMIS earned income changes can be made during the FM-OO period, but PACMIS will only do the 185% test in month 1 and 7.

Second Six Months:

To receive the FM-OO Medicaid for the second six months, the household must:

- A. Complete a Review;
- B. Pass the two income tests; and
- C. Continue to be eligible for FM-O.

The FM-OO Review

- A. PACMIS will generate a review to be sent out in Month 5. The review is due by the 1st day of Month 6.

If the FM-OO Review is not turned in (without good cause) or the household is not eligible for FM-OO Medicaid, the case must be closed at the end of Month 6. Look at eligibility for other Medicaid programs.

PACMIS will automatically close the case if the review is not registered.

If the review is not turned in by the 1st of the month (Month 6), we can continue to accept the review through Month 7. If eligible, begin eligibility at the beginning of Month 7. If the review is received Month 8 or after, it can be used as an application. However FM-OO eligibility will not be a possibility because the household did not have FM-O, Diversion, or FEP in Month 7.

Example:

Ginger's FM-OO Medicaid began January 1. A FM-OO Review is sent out May 15. It is due June 1 to determine ongoing eligibility for July. If the review is not turned in, PACMIS will automatically close the case June 30. If she turns in the review in June or July, the case can be reopened effective July 1 as long as she is eligible. If the review is late, look for good cause.

If no good cause exists, use the review as a new application and look at eligibility under another Medical program.

B. At the review, the household must pass the two income tests:

1. Test 1- The earned income of the parent must be under 185% of Poverty
2. Test 2- Count the parent's unearned income and the rest of the household's earned and unearned income. (The parent's earned income is disregarded.)
The income must be under the FM-O Gross and Net Tests.

Changes in the earned income of the parents for the second six month period does not affect eligibility. The parent **DOES NOT** have to have earned income to continue to be eligible for FM-OO.

C. The household must continue to be eligible for FM-O each month.

If the household does not meet the eligibility requirements in any of the months, close the FM-OO Medicaid. Look for eligibility for other Medicaid programs including FM-O and TR.

Processing the FM-OO Review

FMRR: Used to register a FM-O-O Review

1. On the FMRR screen:


When a review has been received and is complete:

Enter: Date the review has been received.

Enter: Y to indicate the review is complete.

FMRR	1931 FM REVIEW REGISTRATION/HISTORY	23AUG01 14:17
		ELIG 1
CASE NAME: MAAS, STEPHEN	CASE NUMBER: 00007886	
REGISTRATION/HISTORY		
BENEFIT MONTH: JUL01		
REVIEW MONTH	DATE PRINTED	DATE REC'D
-----	-----	-----
JUN01	05may01	01JUN01
		COMPLETE

		Y



NEXT-->

To Process the FM-OO Review:

1. Register the Review on FM-RR.
2. Copy details to the next month.
3. Enter reported changes and best estimate of the household's income.

PACMIS will process the income tests.

Test 1: FMGI

1. PACMIS will compare the parent's earned income to 185% of Poverty.
2. If the parent's earned income is more than the 185% of Poverty, the household is no longer eligible for FM-OO. Look at eligibility for FM-12 (Transitional Medicaid).
3. If parent's earned income is less than 185% of Poverty, PACMIS will go to Test 2.

Test 2: FMIE

1. PACMIS will disregard the parent's earned income.

PACMIS count the rest of the household's income (parent's unearned income and all other household members earned and unearned income).

PACMIS will compare the household's income to the FM-O income limits.

2. If the household's income is less than the FM-O income limits:
(FM-OO will continue.
3. If the household's income is more than the FM-O income limits:
; Close FM-OO. Look at other Medical programs.

Note: The household would not be eligible for FM-12 because the case is not closing due to a parent's earned income. The case would be closing due to unearned income of a parent or earned income of children.

Things to Remember:

1. Review Month:

Set the review month for one year.

PACMIS will automatically send out a review at 6 months. PACMIS reads “FM-OO Medical Month In” field on the ETRC screen to determine which month to send out the review.

2. Adjusting the Extended Medical Months:

If the month of the extended period should be adjusted, make the adjustment on the ETRC screen in the “FM-O-O Medical In” field. This field should show the month of extended medical for that benefit month.

Example:

Diane has been receiving FEP.

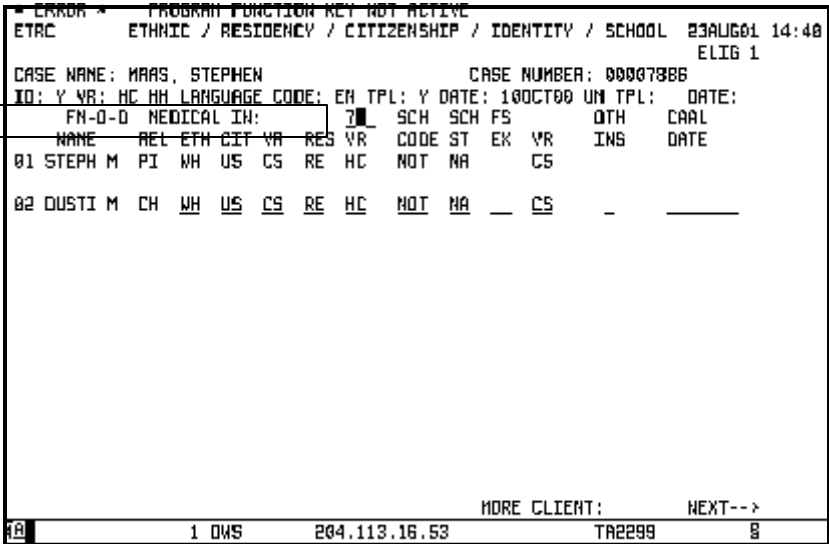
On August 25, she reported that she started working on June 1. Based on her wages, she was not eligible for July benefits. The case should have closed June 30 and Extended FM-O-O should start in July.

However, we have to close the FEP case effective August 31 because she already received August benefits. We have to close the FM case effective September 30th because of 10 day advance notice rules.

Because July should be the first month of the FM-O-O we need to adjust the ETRC screen to reflect the correct month of Extended Medical.

On PACMIS, determine the correct month of Extended FM-O-O for the benefit month. Enter that month on the ETRC screen in the “FM-O-O” field.

In our example, if we are in the benefit month of October, the FM-O-O field should show Month 4 because October is the fourth month of the extended medical.



ERROR * PROGRAM FUNCTION KEY NOT ACTIVE

ETRC ETHNIC / RESIDENCY / CITIZENSHIP / IDENTITY / SCHOOL 23AUG01 14:40
ELIG 1

CASE NAME: MAAS, STEPHEN CASE NUMBER: 00007886

ID: Y VR: HC HH LANGUAGE CODE: EN TPL: Y DATE: 10OCT00 UN TPL: DATE:

FM-O-O MEDICAL IN: 7 SCH SCH FS QTH CAAL

NAME REL ETH CIT VR RES VR CODE ST EK VR INS DATE

01 STEPH M PI WH US CS RE HC NOT NA CS

02 DUSTI M CH WH US CS RE HC NOT NA CS

MORE CLIENT: NEXT-->

1 DWS 204.113.16.53 TA2299 8

FMIC Screen

The FMIC screen is a calculation Help screen only. It can be used to help you determine if a household passes the FM-O Gross and Net Test.

Enter the appropriate household size and income.

PACMIS will display the 185% of poverty and gross and net tests for FM-O to help you decide the best program to use.

Use the FMIC screen to help you decide which program is appropriate.

FMIC	FAMILY MEDICAL INCOME COMPARISON	06AUG01 14:32
	PROSPECTIVE	ELIG 1
CASE NAME: MAAS, STEPHEN	CASE NUMBER: 00007886	MONTH: JUN01
HOUSEHOLD SIZE:		
TOTAL EARNED INCOME	:	387.00
TOTAL UNEARNED INCOME	:	200.00
TOTAL COUNTABLE INCOME	:	587.00
POVERTY LEVEL LIMIT	:	0.00
1931 GROSS INCOME LIMIT	:	0.00
1931 NET INCOME LIMIT	:	0.00
PLEASE ENTER THE HOUSEHOLD SIZE TO CALCULATE THE POVERTY GROSS AND NET LIMITS		NEXT--> _____
1	DWS	204.113.16.53 TA2699 8

The edit messages are

SUGGESTIONS ONLY!

NOTICE: MAFO

TITLE: BEGIN 12M EARNED INCOME DISREGARD-FMO O

BEGINNING &&BENEFF&& WE WILL STOP COUNTING YOUR EARNED INCOME WHEN WE DETERMINE ELIGIBILITY FOR FAMILY MEDICAL ASSISTANCE FOR UP TO 12 MONTHS.

WE ALLOW THIS EARNED INCOME DISREGARD FOR HOUSEHOLDS WHO HAVE BEEN RECEIVING FAMILY MEDICAID BUT WOULD HAVE OTHERWISE LOST ELIGIBILITY DUE TO THE EARNED INCOME OF A PARENT.

THIS COULD EXTEND YOUR ELIGIBILITY FOR FAMILY MEDICAID FOR UP TO 12 ADDITIONAL MONTHS.

TO RECEIVE THE EARNED INCOME DISREGARD FOR THE FULL 12 MONTHS, YOU MUST CONTINUE TO MEET ALL OTHER ELIGIBILITY REQUIREMENTS FOR FAMILY MEDICAL ASSISTANCE AND YOU MUST COMPLETE A REVIEW IN THE SIXTH MONTH. YOU WILL RECEIVE A REVIEW FORM IN THE MAIL. WE WILL ALLOW THE EARNED INCOME DISREGARD FOR AN ADDITIONAL 6 MONTHS IF:

1. YOU COMPLETE THE REVIEW ON TIME.
2. YOUR EARNED INCOME DOES NOT EXCEED 185 PERCENT OF THE FEDERAL POVERTY LEVEL.
3. YOUR HOUSEHOLD CONTINUES TO MEET ALL OTHER ELIGIBILITY REQUIREMENTS FOR FAMILY MEDICAL ASSISTANCE.

IF YOU HAVE ANY QUESTIONS ABOUT THIS NOTICE, PLEASE CONTACT US AT %%%%%%%%%%. COLLECT CALLS WILL BE ACCEPTED. THIS ACTION IS BASED ON VOLUME III F SECTION 409-3.

12 Month FM-OO Closure

Once the household has received the 12 months of the FM-OO Medicaid, the FM-OO Medicaid must be closed.

1. Look at eligibility for regular FM-O.
2. If the household is not eligible for regular FM-O, look at eligibility for TR. The household may qualify for Transitional Medicaid if they were not eligible for FM-O due to:
 - A. Earned income of a parent, or
 - B. Hours of employment of a parent
3. If they do not qualify for FM-O or TR, look at other Medicaid programs.

Section 3

Transitional Medicaid

TWELVE MONTH TRANSITIONAL MEDICAL

“FM-12 or TR Medical”

Volume IIIIF, Section 309

Transitional Medicaid (FM-12) is Medicaid coverage for the family. The length of Transitional medical may be up to 12 months. Coverage can be less than 12 months if the household does not comply with or continue to meet FM-12 requirements. No spenddown is allowed.

To receive FM-12 the household must have:

1. Received FEP, FEP-TP, FM-O, or Diversion (with Medicaid) AND
 - 1) Received any one of these programs in 3 of the last 6 months prior to the month of eligibility AND
 - 2) The case was closed because:
 - 1) Earned income of the parent played a role in the case closure (FEP, FEP-TP, or FM-O cases), OR
 - 2) The hours of employment of the primary wage earner in a two parent household exceed 100 hours per month, OR
 - 3) Household does not qualify for FM-OO because the earned income of the parents is over 185% of Poverty.

OR

2. Received FM-OO Medicaid and no longer qualifies for the program because:
 - A. Twelve month time limit is over and the household is not eligible for FM-O, or
 - B. Deprivation of support exists in a two-parent home because the primary wage earner is working more than 100 hours per month, or
 - C. Earned income of a parent is over 185% of Poverty at the 6-month review, or
 - D. Loss of \$30 and 1/3 disregard for a household member other than the parent. (Since the parent's income is disregarded for FM-OO, the \$30 and 1/3 does not apply to parents' income.)

Households usually receive at least 6 months of FM-12 as long as there is:

- ☐ An eligible child in the home, and
- ☐ The household continues to live in Utah.

To continue eligibility beyond the 6 months the household must:

- ☐ Have an eligible child
- ☐ Live in Utah
- ☐ Verify earned income and expenses (quarterly reporting)
- ☐ Parent must have earned income (or good cause)
- ☐ Earned income after deductions must be under 185% of Poverty



Eligibility for FM-O, FM-OO, or FEP must be ending because of the earned income of the parent. If the customer requests their case to be closed, they are not eligible for FM-12.

MEETING TRANSITIONAL REQUIREMENTS

Transitional Medicaid is allowed only after a 1931 FM-O (including FM-OO), FEP, or Diversion Medicaid closure.

To be eligible for 12 month TR, the household must have received one of the above programs in 3 out of the last 6 months prior to the month they lost eligibility. The earned income of a parent or hours of employment must play a role in the closure. They must also meet specific requirements depending on which program is closing.

1. **FEP or Diversion Closure**

If the household lost eligibility for FEP due to the earned income of a parent and the household is not eligible for FM-OO because:

- 1) the parent's income exceeds 185% of poverty, or
 - 2) the household's assets exceed the limit for 1931 FM-O but not for FEP, or
 - 3) the household does not meet deprivation requirements for 1931 FM-O
- the household may be eligible for TR.

Example 1:

Harriet Nelson has been receiving FEP for her two children for the last year. She is now working full time and based on her anticipated wages she will earn \$4000 per month. She is no longer eligible for FEP.

Her earnings make the household ineligible for FEP. Determine eligibility for FM-OO or FM-12 medical benefits.

First, look at eligibility for FM-O:

The anticipated earnings of the parent is over the Gross Test for FM-O so she is not eligible for FM-O

Next, look at eligibility for FM-OO:

The anticipated earnings of the parent is over 185% of Poverty. The household is not eligible for FM-OO.

Next, look at eligibility for FM-12 Medicaid:

The household qualifies for FM-12 Medical because:

- A. They received FEP in 3 of the last 6 months.
- 2) The parent's earned income played a role in why they were no longer eligible for FEP, and
- 3) They do not qualify for FM-O or FM-OO.

Example 2:

Mrs. Cleaver has been receiving FEP for the last year. She works part time at the library. There is no change

in her hours of employment or wages. They were just approved to receive Social Security death benefits.

Based on the earned income (wages) and unearned income (SSA) they are no longer eligible for FEP because their income is too high.

To be eligible for FM-OO or FM-12, the earned income must play a role in the case ineligibility.

To determine if earned income played a role in the case closure look at eligibility counting only the Social Security income (not the earned income of the parent).

- A. If the household is not eligible based only on the unearned income, the earned income did not play a role in the closure.
 - ; The household would not be eligible for FM-OO or FM-12 because earned income did not play a role in the closure (the closure was due to the unearned SSA income).
- B. If the household is eligible based only on the unearned income, the earned income was a factor in the case closure.
 - (The household would be eligible for FM-OO or FM-12 because the earned income of a parent played a role in the ineligibility of the case.

2. **FM-O Households**

When the FM-O case closes for one of the following reasons, the household may qualify for FM-12 Medicaid. They must also meet other FM-12 requirements.

Closure reasons to allow FM-12:

1. The earned income of the parents goes over 185% of Poverty during the FM-O eligibility period or at the FM-OO 6 month review, or
2. The 12 month disregard (FM-OO) has expired and the earned income of the parents exceeds the FM-O limit, or
3. The child is no longer deprived of parental support because the primary wage earner in a 2 parent household is working more than 100 hours per month, or
4. Any household member is no longer eligible for the \$30 and 1/3 disregard or \$30 disregard which causes the countable income to exceed the limit for 1931 FM-O or OO.

To determine if the household is eligible for TR, follow the steps on the next page.



TR STEPS

Step 1: Is there an eligible child in the home? The child does not need to be deprived of parental support for TR.

If the answer is yes, go to step 2.

If the answer is no, there is no eligibility for TR. Look at other Medicaid programs.

Step 2: Did the household receive any of the following in 3 of the last 6 months?

- A. FEP, FEP-Two Parent (AF-WP), or Diversion with Medicaid
- B. FM-O (1931 Medicaid)
- C. FM-O Medicaid with the income disregard (FM-OO)

If the answer is yes, continue to step 3.

If the answer is no, there is no eligibility for TR. Look at other Medicaid programs.

Step 3: Did the parent's earned income play a role in the closure of FM-O or FEP?

If the answer is yes, go on to Step 4.

If the answer is no, the household is not eligible for TR.

Step 4: There are specific closure reasons the household must meet in order for them to qualify for FM-12 depending on which program is ending.

FEP CLOSURE

The earned income of a parent must play a role in the closure of FEP, FEP-TP or Diversion; along with one of the following:

- 1) The household is not eligible for FM-OO because the parent's earned income exceeds 185% of poverty, or
- 2) The household is not eligible for FM-O because of deprivation, or
- 3) The household exceeds the asset limit for FM-O but not for FEP, or
- 4) If the loss of the 30 and 1/3 income disregard increased the countable earned income of a parent; earned income of the parent is playing a role in the closure. (The income of the parent did not have to increase.)

If the parent's earned income plays a role in the closure and the household meets one of the other requirements, the household is eligible for TR.

If the household is not eligible for FM-OO or TR, look at other Medicaid programs.

FM-O Closure

Earned income of the parent must play role in the closure of FM-O and the household is not eligible for FM-OO because:

- 1) The parent's earned income exceeds 185% of poverty, or
- 2) Deprivation no longer exists because the primary wage earner in a two parent household is working over 100 hours per month.

If the parent's income plays a role in the closure and the household is not eligible for FM-OO because one of the above reasons, the household is eligible for TR.

If the loss of the 30 and 1/3 income disregard on a child's countable earned income causes the closure, then the household may be eligible for TR. (The income of the parent did not have to increase.)

If the household is not eligible for FM-OO, look at other Medicaid programs.

FM-OO Closure

If the household has been receiving FM-O with the earned income disregard (FM-OO), one of the following must exist to open TR.

- ☐ The 12 months time limit for FM-OO has ended, or
- ☐ Parental earned income which exceeds 185% of poverty at the six month review, or
- ☐ No deprivation exists.

If one of these factors does not exist, the household is not eligible for TR, look at other Medicaid programs.

Households Receiving FEP Diversion Medicaid - Section 309-1#3

Diversion Policy Reminder:

During the diversion months households have the option of receiving Medicaid. To qualify for Medicaid, the household must comply with the Duty of Support requirements.



After the three months of Diversion, determine if the household is eligible Medical programs. Look at the eligibility for programs in this order:

1. FM-O
 2. FM-OO (disregarding the earned income of the parents)
 3. FM-12
-
1. Determine eligibility first for FM-O. The household must have an eligible child deprived of parental support and meet all of the income and asset rules.
 2. To determine eligibility for FM-OO, the household must meet all the requirements of FM-O (including deprivation of support) except income.
 - A. The earned income of the parents must be under 185% of Poverty
 1. If it is over, look at FM-12 eligibility.
 2. If it is under, the household must meet other FM-O eligibility factors.
 3. Income calculation for FM-OO:
 - A. Disregard the earned income of the parent and compare all other countable income to the FM-O income limits.
 1. If the income is under, the household is eligible for FM-OO.
 2. If the income is over, look at eligibility at other programs.
 2. To be eligible for FM-12 Medicaid:
 - A. The household must not qualify for FM-OO because:
 - └ The earned income of the parents exceed 185% of Poverty, or
 - └ Household does not meet deprivation because the primary wage earner is working over 100 hours per month.



When determining eligibility for FM-12 after Diversion:

T Use the income and eligibility in the month after the three month diversion period.

T To get the appropriate income:

- A. Set an alert at the beginning of the third month of the Diversion period
- B. When you get the alert, send a notice to request anticipated income in month 4. Use the GI12 notice to request the information.

To be eligible for FM-12 after Diversion:

- A. The household must be ineligible for FEP based on income in Month 4, AND
- B. Earned income must play a role in the ineligibility for FEP.

Step 1.

Use the household's unearned income only.

Determine if the household's income is under the FEP limits.

- ; If they are over the FEP limits, the household would not eligible for FM-12 because ineligibility is based on unearned income only (earned income did not play a role in the FEP ineligibility).
- (If they are under the FEP limits, go to step 2.

Step 2.

- 1. Use the earned and unearned income of all household members
- 2. Deduct the \$100 work allowance for each employed person. This is the only deduction allowed.
- 3. Compare the countable income to the FEP payment.
 - (If they are over the FEP limits, the household is eligible for FM-12.
 - ; If they are under the FEP limits, the household is not eligible for FM-12 because they would have been eligible for FEP. (To qualify for FM-12, the household must be ineligible for FEP.)



If the household is not eligible for FM-12, look at eligibility for other Medicaid programs.

Question 1:

Ms. Nelson received a Diversion payment and Medicaid in March (for March, April, and May) for herself and two sons.

In May, she reported that she has started to receive Unemployment Benefits.
She is under the income limits for FM-O.

What Medicaid program would she be eligible for?

Question 2:

Mrs. Green received FEP Diversion payment and Medicaid in March (for March, April and May.) When we requested verification for June, she reported that her husband has returned to the home. He is working full time. Based on his earnings, the household would not be eligible for FEP.

What Medicaid program would the household be eligible for?

Answer 1:

FM-O	Eligible. Child is deprived of parental support and the household meets the income criteria for FM-O.
------	---

Answer 2:

FM-O	Not eligible - no deprivation of support
FM-OO	Not eligible - no deprivation, primary wage earner over 100 hours.
FM-12:	Eligible - his earnings made the household ineligible for FEP. There is no deprivation of support rule for FM-12 Medicaid.

PACMIS DETAILS

Closure code to give FM-12 Medicaid:	TR
Notice to explain FM-12 after FEP	FCTR
Notice to explain FM-12 after FM-O	MCTR
Closure notice for end of FM-12 benefits	XMET (auto notice)
Closure code for no Quarterly report	QR
Closure notice for no Quarterly report	MCQR
Closure code for no earnings/no good cause	FE
Closure notice for no earnings/no good cause	MCFE
Closure code for income too high	NI
Closure notice for income too high	MCNI
Closure code for not providing verification	VG
Closure notice for not providing verification	MCVG
Notice to continue eligibility after receipt of 632T:	
1st and 2nd quarterly report	MBST
3rd quarterly report	MBWE

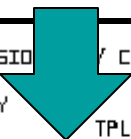
DEDUCTIONS: Post on EXPE (retro screen)

Paid Child Care DC ____
 (The amount paid is posted next to the child, with the position number of the person responsible in the sub-type field).

PACMIS Procedures For Opening FM-12

When the FEP, FEP Diversion, or FM-O case closes to allow FM-12, the worker must close the program TR. This automatically opens an FM-12 month Medicaid and takes the worker to the ETRC screen to set the counter.

The FM-12 Medicaid begins the month the household is no longer eligible for FEP, FEP Diversion, or FM-O. If we close the FEP or FM-O case and have to give one extra month of eligibility because of notice requirements, FM-12 would start with the first month FM-12 should have started. We may have to adjust the “counter” on the ETRC screen. Remember 10-day advance notice is not required for FEP, but it is required for Medicaid.



```
ETRC          ETHNIC / RESID / CITIZENSHIP / IDENTITY / SCHOOL 12FEB01 14:25
                                                    ELIG 1
CASE NAME: BUNDY, PEGGY          CASE NUMBER: 00007897
ID: 7 VR: HC          TPL: Y DATE: 05JAN01 UM TPL: DATE:
TRANSITIONAL MEDICAL IN: 1 SCH SCH FS OTH CAAL
NAME REL ETH CIT VR RES VR CODE ST EX VR INS DATE
01 PEGGY B PI WH US HC RE CS NOT NA CS
02 KELLY B CH WH US HC RE HC GRN FT CS
03 BUD B CH WH US HC RE HC NOT NA CS

MORE CLIENT: NEXT-->
```

Example:

Mrs. Jones and her family have been receiving FM-O. On May 22 we have determined that Mrs. Jones is no longer eligible for FM-O because of her earned income. The FM-O case must be closed effective June 30 because of 10-day notice requirements. However, the FM-O should begin on June 1. June would be month 1 of the FM-OO Medical period.

Because we have closed the FM-O case effective June 30 Pacmis will think that the FM-OO Medicaid should begin on July 1.

To have PACMIS count the months correctly and ensure that the Quarterly reports are sent out correctly, change the counter on the ETRC screen to reflect that July is Month 2.

Practice

Example 1

Carla is receiving FM-O for herself and daughter. On June 23, she reported that she got a job. Based on a best estimate for July, she will not be eligible for FM-O in July.

When would we close her Medicaid?

When would FM-OO or FM-12 benefits begin?

Example 2

On June 25th Diane got a new job. Based on her earnings, she is not eligible for FEP in July. However, Diane did not report her new job until September 25th. We got verification on that day also.

When would we close the Medicaid case?

When would FM-OO or FM-12 benefits begin?

Answer 1:

Medicaid should close July 31 because 10-day notice is required.

FM-OO Medicaid would start July 1 even though the Medicaid closed July 31 because of notification requirements. Set the counter on ETRC to show August as month 2.

Answer 2:

Medicaid should be closed October 31 (10 day notice is required).

Because the FEP case should have closed June 30, the FM-OO will begin July 1 (even though her FEP case was actually closed September 30).

The counter on the ETRC screen will need to be changed to show that November is month 5 of the FM-12 period.

ETRC

Once the counter on ETRC is set, roll through all of the PACMIS screens updating the information. Go to SEPA and include the following household members.

1. FEP and FM-O household members
2. FEP and FM-O household members that should have been included but were not included because of sanctions or non-participation

Exception: Medicaid fraud. If a person is excluded from the Medicaid coverage because of Medicaid fraud, they cannot be included in the FM-12 coverage.

Question:

Mrs. Cleaver has been receiving FM-O for herself and 2 young children. She is not cooperating with ORS. She has not been included in the Medicaid coverage. She is working and based on earned income, the household is no longer eligible for FM-O. Can they receive FM-OO or FM-12? Who would be included?

Answer:

Yes, the household can be eligible for FM-OO because earned income played a role in the closure.

Mrs. Cleaver cannot be included in the FM-OO coverage because cooperation with ORS is a requirement for the FM-OO program.

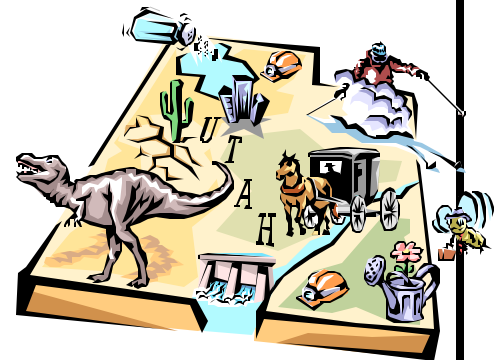
If the household had been eligible for FM-12 only, she could have been included in the Medical coverage because Duty of Support cooperation is not an eligibility requirement for FM-12. She cannot choose to have the case opened as FM-12, rather than FM-OO.

On EAIN, post the same earned income that is on the prospective screen to the EAIN income retrospective screen.

This must be done in the first month of the FM-12 period. It will prevent PACMIS from closing the case at the end of the 6th month for no earnings being registered. This amount will then copy forward so that the case will pass income for the first report period.

After we have determined that the household is eligible for FM-12, they must continue to meet the following requirements to continue to receive FM-12:

- If the household leaves Utah during the FM-12 period, close the case at the end of the month that they leave. If they return to Utah during that original FM-12 period, FM-12 can be reopened from the month they re-established residency. They must meet the income requirements in order to continue to be eligible. They are not eligible for Medicaid for the months they were not living in Utah.



Income Reporting Requirements Definitions - Section 309-4

Quarterly Report Periods

There are three quarterly reporting periods during the 12-Month FM-12 coverage. Each quarterly reporting period covers a three-month period. The first quarterly report period starts the month after the FEP or FM-O case closes or the month after the three-month diversion period ends.

Report Month:

The report month is the month after the three-month reporting period. It is the month the quarterly report is due. It will be month 4, 7, and 10 of the Transitional Medical period.

Example:

Mrs. Howell has been receiving FM-O for herself and child since Oct.

Mr. Howell returned to the home on December 1. He is working and based on his income, the household is no longer eligible for FM-O.

Close the case effective December 31 using the TR closure code. FM-12 will start January 1.

The Quarterly Reporting periods and report month are as follows:

First Quarterly reporting period:	Jan., Feb., March
Report month:	April
Second Quarterly reporting period:	April, May, June
Report Month:	July
Third Quarterly reporting period:	July, August, Sep.
Report Month:	October

Quarterly Reporting Requirements:

1. The parent must have earnings in each month of the report period (or good cause for not having earnings).
2. The household must continue to have an eligible child in the home.
“Eligible Child” Under 18 or attending school full time and will graduate before age 19

First quarterly reporting period requirements:

- A. The customer must **only report if the parent does not have earnings** in one or more months of the reporting period.
- B. This must be reported by the 17th day of the report month.
- C. Verification is not necessary.
- D. A quarterly report does not need to be registered.



PACMIS will automatically send out an XMQR notice in the third month of the report period (March in our Mrs. Howell example).

This notice will explain that

T The household must report if the parent did not have earnings in one or more months of the reporting period.

T They must report this by the 17th day of the report month (April).

(If the customer does not contact us:

T Assume that they had earnings in each month of the reporting period.

T Continue their eligibility for FM-12.

T The case will not fail due to earnings because we posted earned income on the retro screen when the case was closed “TR”.

; If the customer contacts us and says they did not have earnings in one or more of the months:

T Determine if there is good cause for no earned income.

A. If there is good cause, FM-12 will continue. Take no action, the FM-12 will continue.

B. If there is no good cause, the FM-12 program must be closed at the end of Month 6.

T Set an alert to close the case at the end of the 6th month.

T Closure code is FE (failed earnings)



NOTD

LIST NOTICE DEFINITION TABLE

29Jan01 16:38

NOTICE: XMQR NUMBER OF LINES 30 PAGE: 1 NANCY
EFFECTIVE DATE FROM: 20NOV00 EFFECTIVE DATE TO: 9999999
TITLE: TRANSITIONAL MEDICAL - FIRST QUARTER

>>
YOUR HOUSEHOLD IS CURRENTLY RECEIVING MEDICAID UNDER THE TWELVE MONTH
TRANSITIONAL MEDICAID PROGRAM. IN ORDER TO CONTINUE RECEIVING@@
MEDICAID UNDER THIS PROGRAM, A PARENT MUST HAVE EARNINGS IN EACH @@
MONTH OF THE THREE REPORTING MONTHS. FOR THE FIRST REPORT PERIOD, YOU
ARE NOT REQUIRED TO COMPLETE A REPORT FORM OR VERIFY YOUR EARNINGS.@@
YOU ARE ONLY REQUIRED TO REPORT IF YOU DID NOT HAVE EARNINGS IN ONE OR
MORE OF THE FIRST THREE MONTHS.@@

>>
THE MONTHS ARE: '//////////'@@

>>
IF YOU DID NOT HAVE EARNINGS IN ONE OR MORE OF THE FIRST THREE MONTHS,
PLEASE CONTACT US AT '////////////////////' BY THE 17TH OF NEXT@@
MONTH.

>>
YOU WILL RECEIVE A FULL TWELVE MONTHS OF MEDICAID COVERAGE UNDER THE@@
TWELVE MONTH TRANSITIONAL MEDICAID PROGRAM AS LONG AS YOU MEET ALL OF
CONTINUE (Y OR N):

4A	1 DWS	204.113.10.13	TAT525
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NOTD

LIST NOTICE DEFINITION TABLE

29Jan01 16:39

NOTICE: XMQR NUMBER OF LINES 7 PAGE: 2 NANCY
EFFECTIVE DATE FROM: 20NOV00 EFFECTIVE DATE TO: 9999999
TITLE: TRANSITIONAL MEDICAL - FIRST QUARTER

THE FOLLOWING REQUIREMENTS:@@

- >>
1. YOU CONTINUE TO HAVE A DEPENDENT CHILD IN YOUR HOME.@@
 2. YOU CONTINUE TO RESIDE IN THE STATE OF UTAH.@@
 3. YOU COMPLY WITH THE INCOME REPORTING REQUIREMENTS.@@
 4. YOU HAVE EARNINGS OR HAVE GOOD CAUSE FOR NO EARNINGS IN EACH@@
MONTH.@@
 5. YOUR AVERAGE COUNTABLE EARNINGS DO NOT EXCEED 185 PER CENT OF@@
THE FEDERAL POVERTY LEVEL FOR YOUR HOUSEHOLD SIZE IN THE SECOND@@
AND THIRD REPORT PERIODS.@@

>>
NOTE: YOU WILL BE REQUIRED TO VERIFY YOUR EARNINGS AND CHILD CARE@@
EXPENSES FOR THE SECOND AND THIRD REPORT PERIODS. YOU WILL RECEIVE@@
A REPORT FORM AND INSTRUCTIONS IN THE MAIL.@@

>>

CONTINUE (Y OR N):

4A	1 DWS	204.113.10.13	TAT525
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Second and Third Quarterly Reporting Periods:

1. The household must verify the following for the 3 report months:
 - A. Earned income - The gross earned income of the parents.
 - B. Deductions - Child care expenses.
2. Income Calculation for the Second and Third Quarterly Reports:
 - A. PACMIS will add the parent's actual earned income in each of the 3 quarterly report months.
 - B. Then subtract the actual paid child care expenses for each of those months.
 - C. That figure is divided by 3.
3. Compare this to the 185% Poverty limit.

If over: No longer eligible for FM-12. Close case the case at the end of the report month. Closure code is "NI" (net income).

If under: Continue eligibility.



Note: Verification is due by the 17th of the month (or have good cause for turning in the quarterly report late). The actual report form is not required.

Example: Quarterly report for the second reporting period:

Quarterly report is sent in Month 6 (June). The verification is due by the 17th of Month 7 (July). This is the Report Month.

- (If the information is provided and complete:
- 1) Register the Quarterly report on the TRQR screen.
 - 2) Put an 'x' in the month on FMTR. Post the information on the retro FMTR screen to determine if the household is under the 185% of Poverty.
 - If under: Continue eligibility for FM-12.
 - If over: Close case at the end of the report month - Month 7 (July).
Closure code is NI (net income).
- ; If the information is not provided or is not complete by the last day of the report month:
Close the case at the end of the report month - Month (July).
Closure code is VG (verification not provided).

Note: If the Quarterly Report is not registered, PACMIS will auto-close the case.

Example: Quarterly report for the third reporting period:

Quarterly report is sent in Month 9 (September).

The verification is due by the 17th of Month 10 (October). This is the report month.

Follow the rules for the quarterly report for the second reporting period with the following exceptions:

- A. If the information is not provided or if they are over the 185% limit, close the case at the end of Month 10 (Oct).

FM-12 Calculation example:

Betty is receiving FM-12 for herself and two children. The 185% of Poverty for a household of three is \$2,316 (2002).

Her earnings and allowable expenses are as follows:

	<u>Earnings</u>	<u>Day Care Paid</u>
	\$1,200	\$30
	\$1,600	\$30
	<u>\$2,200</u>	<u>\$30</u>
TOTAL	\$5,000	\$90

$$\$5000 \text{ (Earnings)} - \$90 \text{ (Child care)} = \$4910$$

$$\$4910 \div 3 = \$1636.66 \quad \text{Average monthly income}$$

Compare \$1,636.66 to the 185% Poverty Level

\$1,636.66 is under the 185% Poverty Level. Continue FM-12 Medicaid.

Households will *usually* receive a minimum of 6 months of FM-12 medical.

As long as the parent has earned income and the household continues to live in Utah and have an eligible child, household is eligible for 6 months of FM-12.

After 6 months, the household must continue to meet the income criteria.

Changes During the 12-Month Period

#1 Adding a New Person - Section 309-7

A person can be added to the FM-12 if they would have been included in the FEP or FM-O filing unit. To determine the filing unit remember to look at age of the child and their relationship to other household members.

- T The new person must meet Medicaid age, citizenship, and social security number requirements.
- T Deprivation of support is not a factor when adding a new person to the case.
- T Add the person to the case when it is reported.
- T The new person's income will not be used in the income calculation until we process the next quarterly report.



Example:

Carla has been receiving FM-12 since January 1. She marries in August and reports this in August. Her husband should be added to the FM-12 medical effective August 1 because he would be considered as a household member if we were determining FEP eligibility.

Start using her husband's earnings when we process the next quarterly report which is due October 17th reporting wages for July, August, and September to determine ongoing eligibility for November. We would use his income in July even if he had not been living with her in July.

Question 1:

Ms. Thompson is receiving FM-12 for herself and son JJ.

On March 10 she reported that JJ moved out and that her other son BJ (age 17) moved in. BJ was never on her FEP case.

What action do we take now?

Question 2:

Ms. Davis is now receiving FM-12. She is pregnant. During the transitional period she had her baby.

Can the baby be added to the FM-12 case?

Question 3:

Ms. Andrews started receiving FM-12 on January 1. She got married in the June. Her new husband has 3 young children.

Can her husband and children be added to the case?

What action do we take?

Question 4:

Mrs. Brown had been receiving FM-O for herself and her grandson as a specified relative. She started working and the FM-O case closed using the TR closure code. She and her grandson are now receiving FM-12 Medicaid.

In the 6th month of the twelve month period, her grandson's parents moved into her home.

Can the parents be added to the FM-12 case?

Should grandma (Mrs. Brown) be removed from the FM-12?

ANSWERS

Answer 1:

We need to remove JJ from Ms. Thompson's FM-12 case effective March 30 because JJ is now living with his father who is not currently open for FM-12.

BJ can be added to Mr. Thompson's FM-12 case effective March 1 because he would be part of the filing unit for FEP or FM-O.

Answer 2:

Yes. The baby is added to the FM-12 Medical case.

If the FM-12 case closes before the baby turns one, the baby would be eligible under PN+ because Ms. Davis received Medicaid in the month of birth.

Answer 3:

We can add Ms. Andrews' new husband and children to the FM-12 case effective June 1 even though they were not part of the FEP household at the time of the closure. This is because he would be part of the FEP household if they were applying now.

We would not close the FM-12 case because deprivation of support is not an eligibility factor for FM-12.

His earnings must be reported on the Quarterly Report due on July 17. His income for April, May, and June will count toward 185% test when we process the quarterly report. This will affect August eligibility.

Answer 4:

Yes. The parents can be added to the FM-12 case because they would be part of the filing unit for FM-O.

We would also leave the grandmother on the case because she qualified for FM-12 initially. She may remain on the FM-12 coverage as long as she continues to live in the same household with her grandson.

Changes During the FM-12 Period:



Removing a Person from the Household - Section 307-7 #2

Remove a household member at the end of the month when:

- A. When a household reports that a person has moved out of the home, or
- B. A child no longer meets the age requirements,

If that person was the only eligible child, the FM-12 case must be closed. Look for eligibility for other medical programs for the other household members.

Other Changes - Section 309-7 #3

A. Residency

If a household moves out of Utah, the FM-12 case should be closed at the end of the month. Proper advance notice should be given.

If the household moves back to Utah, they can reapply for medical.

If it is within the original 12 month transitional period, they can receive FM-12 from the month they established residency if they meet the income criteria for the previous reporting periods. It is not limited to a 3-month retroactive period.

The household is not eligible in the months they did not live in Utah.

Use the Counter field on ETRC to indicate the correct month of eligibility.

B. New Applications for FEP, FEP-TP, or FM-O During the FM-12 Period

When a household that is receiving FM-12 reopens their FEP, FEP-TP, or FM-O during the FM-12 period, close the FM-12 case.

If the case closes, re-determine eligibility for FM-12 based on the new closure reason. If they are not eligible for a new FM-12 period, the household may resume their original FM-12 period.

Example:

Sam's FEP case closed December 30th. He is eligible for FM-12 starting in January.

In March he lost his job and reapplied for FEP. FEP was approved for March.

On August 31st his FEP case closed again, this time because of assets.

We would not start a new FM-12 period for the August 31 closure because the case was closed due to assets.

He is eligible for FM-12 medical under the original FM-12 period established in December as long as all other FM-12 medical eligibility criteria are met.

If the August case had been closed due to earned income over the limit, we could reestablish a new FM-12 period starting in September.



When to Close a FM-12 Case:

The FM-12 case must be closed for any of the following reasons:

- A. Parent did not have earnings in any of the report months (and no good cause for not having earnings).
Close the case at the end of the report month.
- B. Household did not provide verification for the second or third quarterly report period (and there was no good cause for a late report).
Close the case at the end of the report month.
- C. Average earned income minus child care expenses exceed the 185% of Poverty for the second or third quarterly report period.
Close the case at the end of the report month.
- D. The household does not have an eligible child in the home.
Close the case at the end of the month that there is no longer an eligible child.
- E. Household moves out of Utah.
Close the case at the end of the month that the household moves out of state.

The case can be reopened if the verification is provided after the report month if there is good cause for a late report.

Good Cause For No Earnings - Section 309-5

If the parent does not have earned income in reporting months, check to see if there is good cause for not having earnings.

Good cause reasons:

1. Individual was employed in the month but the date in which the person is paid does not fall in that month.
2. Involuntary loss of employment. Good cause under this condition is not time limited.
3. Illness of the employed person or family member.
4. Death in the family
5. Supervisor may decide that the parent had good cause for no earnings.



; If they do not have good cause: FM-12 must close at the end of the report month.

(If they have good cause: FM-12 may be continued if all other eligibility factors are met.

On the FMTR screen, put a Y in the Good Cause field.

Question:

The Skipper has been receiving FM-12 for himself and his family since January.

He turned in his quarterly report on July 5. This report shows that his only income is unemployment benefits.

Can his FM-12 continue?

Answer: Yes. He does not have any earned income but he is receiving unemployment benefits due to an involuntary loss of employment. This is a good cause reason for not having earned income.

Good Cause for a Late Report - Section 309-6

The FM-12 case must be closed at the end of the report month if the verification is not provided by the 17th of the report month **unless there is good cause.**

Good cause reasons are:

1. Quarterly report was not mailed by the 25th of the month before the information was due.
2. Quarterly report was mailed to the wrong address.
3. Employed or family member was ill
4. Death in the family
5. Employer refused to provide the information or caused the delay in providing the verification.
6. Supervisor decides that there was good cause.



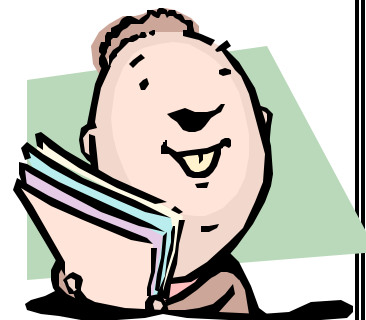
Reopening a FM-12 Case - Section 309-8

We can reopen the FM-12 case if the case was closed for one of the following reasons:

- A. Verification was not provided by the 17th of the report month, but was provided by the end of the month.
- B. Verification was provided after the report month and there was good cause.
- C. Case was closed because the household moved out of state, then later reestablished Utah residency during the original FM-12 period.
- D. During the original FM-12 period, the FM-12 case was closed because the household was approved for FEP or FM-O, then the FEP or FM-O case was closed during that FM-12 period. The case can be opened for the remainder of the FM-12 period.

Revert the FM-12 case to open if the case has closed for the following reasons:

- 1. Late income report:
Household provides information needed to completed their income report after the 17th but before the last day of the report month
- 2. Late income report and good cause exists:
Household provides information needed to complete their income report after the last day of the report month AND they had good cause for a late report.



The case can be reopened in the following circumstance. However, we cannot use the Revert to Open process.

- 1. Household moved out of State and returned to Utah a few months later.

FM-12 can begin from the month the household established residency as long as they meet all eligibility requirements. Register the case and change the ETRC to reflect the correct month of FM-TR eligibility.

Question 1:

The Peterson household was receiving FM-12 Medicaid. They did not provide information on their second income report that was due July 17. The case was closed effective July 31.

On July 25, the provided the required verification and they are still eligible for FM-12.

What action do we take?

Question 2:

The Christensen household started receiving FM-12 in January. They did not provide the information on their second report that was due July 17. The case was closed effective July 31.

On August 15, the verification was provided. The reason the verification was late was because the Quarterly report was sent to the wrong address.

What action must be taken?

Question 3

The Stevens household started receiving FM-12 on January 1. In March, the moved to California.

In July, the moved back to Utah. They reapplied for Medicaid in August.

What action do we take?

Question 4:

Ms. Simpson began receiving FM-12 for herself and children in January.

In May, she lost her job and reapplied and was approved for FEP.

In June, she started receiving unemployment benefits. Based on this income, she was over the income limits for FEP.

What action do we take?

Question 5:

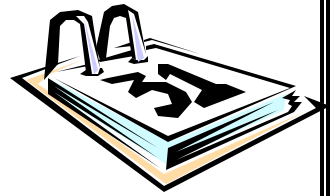
Mr. Gellar's FM-12 case started January 1.

In August, he lost his job and reapplied for FEP. He received FEP for August, September, and October. In October he got a new job. His FEP case closed effective October 31 because his earned income makes him ineligible for FEP.

What action do we take?

Answer 1:

If eligible, revert the case to open because the verification was provided by the end of the report month. They are eligible for benefits for August.



Answer 2:

If eligible, we can revert the case to open effective August 1. There was good cause for the verification to be late (Quarterly report was sent to the wrong address).

Answer #3:

If eligible, we can reopen the FM-12 Medical from the month they returned to Utah (July). They must meet the income requirements.

1. To satisfy the first quarterly report requirements we need verification that they had earned income in January, February and March or have good cause for no earned income.
2. To satisfy the second quarterly report requirement, we need verification of earned income and child care expenses for April, May, and June.
 - A. Register the quarterly reports.
 - B. Post the income; it must be under 185% of the Poverty.
 - C. If eligible, open the FM-12 case starting with July (the date they reestablished residency in Utah.
 - D. Reset the counter on ETRC. July will show Month 7 (7th month of the FM-12 period).

Answer 4:

Look at eligibility for FM-O first. If not eligible, look at the original FM-12 time period. We cannot start a new FM-12 case for the June closure because:

1. Earned income did not play a role in the FEP closure and
2. She did not receive FEP, FEP-TP or Diversion in 3 of the last 6 months.

However, we can look to see if she is eligible for FM-12 under the original FM-12 period. She would have to meet the income criteria for the original FM-12 time frames.

- A. If eligible, post income on appropriate screens.
- B. Reset the counter on ETRC for July to 7.

Answer #5:

Close the case using the TR closure code.

We can start a new FM-12 period starting in November because:

1. Earned income played a role in the closure, and
2. He received FEP in 3 of the last 6 months.

Child Support Enforcement and TPL - Section 309-9

Individuals do not need to meet the child support enforcement or TPL requirements to receive FM-12 medical.

Be aware: If a person was not be included in the financial or medical portion of the case because of non-participation with their Employment Plan, ORS, or TPL, they could be included in the FM-12 coverage.



Example:

Mom has been removed from the Medicaid portion of FEP for not completing ORS requirements. If her case closes due to earned income and the household qualifies for FM-12, she can be included in the FM-12 Medicaid coverage.

Customer Service Tip:



Be sure to look at FM-12 eligibility for EACH household member when opening FM-12. There may be some household members who were not eligible for Medical while on FEP but may now be eligible for FM-12.

Notice Requirements - Section 309-10

Advance 10 day notice is required when closing a FM-12 case.

Ten-day notice is not required when closing a FEP case, but it is required when closing a Medicaid case.

If we give 1-day notice when we close a FEP case using the TR closure code, the FM-12 will start the month after the FEP closed, even though we would have had to give 10 day advance notice on the Medicaid portion of the closure.

Review Requirements for FM-12 - Section 309-11

After the FM-12 case closes, look for other Medicaid programs the individuals may be eligible for.

As a reminder to look for other Medicaid programs after the end of the FM-12 period:

A review will be sent out to the customer 40 days prior to the effective date of the closure.

Questions

1. Mork is receiving FEP for his 2 children. He is not included in the financial payment or medical benefits because he does not meet the citizenship status for the programs. He is now working and based on earnings, the FEP case is being closed.

Is his household eligible for FM-12 Medical? Why or why not?

If eligible, who would be included in the FM-12?

2. Mary Ann Cunningham is receiving FM-O for her 17-year old son Richie. She is not included in the FEP payment because she receives SSI. Richie is working part-time. He is now working more hours and based on his income, he is no longer eligible for FM-O. Is the household eligible for FM-12?

Answers

Question 1.

Yes, the household is eligible for FM-12 because Mork's income earned income makes the household ineligible for FEP. (His income must be counted in determining eligibility for the rest of the household even though Mork is not included in the financial payment because of his citizen status.)

The children would be included in the FM-12 coverage. Mork cannot be included in the coverage because he does not meet citizenship rules.

Question 2.

No. To qualify for FM-12, it must be earned income of a parent that makes the household ineligible for FM-O. Because it is Richie's income that make the household ineligible and because Richie is not a parent, he cannot qualify for FM-12.

Registering a Quarterly Report

ELWM	ELIGIBILITY WORKER MENU	24AUG01 08:20 ELIG 1
1. INQUIRY	9. MEDICAL EXPENSE INFORMATION	
2. APPLICATION ENTRY	10. MEDICAL EXPENSE LOG	
3. TRANSITIONAL QTRLY RPT REG/HST	11. MEDICAL EXPENSE SPENDDOWN	
4. CASE MAINTENANCE	12. MEDICAL EXPENSE USED	
5. UNDERPAYMENTS	13. NOT AVAILABLE	
6. ALERT MAINTENANCE	14. NOT AVAILABLE	
7. ALERT DUE TODAY OR OVERDUE	15. REVIEW MENU	
8. NOT AVAILABLE		
ENTER FUNCTION (BY NUMBER): █		
CASE NUMBER (FOR 3,5,6,9-14):		
PROGRAM TYPE (FOR 5 ONLY):		
BENEFIT MONTH (FOR 3,5,9-13):		
BUDGETING METHOD :		
NEXT-->		

The month is now July 2002.

First Quarter:

Months: January - March

Reporting Requirements: Customer must report if the parents did not have earned income

Second Quarter:

Months: April - June

Reporting Requirements: Customer must report parents' earned income received in April, May, and June

Quarterly Report: Sent out in June

Due July 17

It determines ongoing eligibility for August.

The household is not eligible for further benefits until the Quarterly report has been completed.

Register the Quarterly Report by selecting Function #3 on ELWM.

The Benefit Month must be entered.

The Benefit Month is the month we are determining eligibility for.

(1 st Quarter	No report required)
2nd Quarter	Month 8
3 rd quarter	11th Month

In our example, we must register the quarterly for the second quarter. The Benefit month should be August.

```

* INFO *      NO QUARTERLY REPORT PRINTED
TRQR          TRANSITIONAL QUARTERLY RPT REGISTRATION/HISTORY      24AUG01 08:23
                                           ELIG 1
CASE NAME: BUNDY, PEG                      CASE NUMBER: 00008005

      REGISTRATION/HISTORY

      BENEFIT MONTH: AUG02

      TR RPT   DATE   DATE
      MONTH   PRINTED REC'D   COMPLETE
      -----
      jun02   10jun02 10jul02       y

```

NEXT-->

1 DWS 204.113.16.53 TA1709

TR Rept Month field: PACMIS enters the month the Quarterly report is mailed.

Date Printed: PACMIS enters the date the Quarterly report was printed.

Date Rec'd Field: Enter the date the report was received.

Complete field: Indicate whether the Quarterly Report is complete.
Y = Yes, N = No.

Good practice idea:

Don't register the quarterly report until it is complete. If you register an incomplete report, PACMIS will not auto-close the case if it is not completed.

FMTR		TRANSITIONAL MEDICAL INCOME ELIGIBILITY		24AUG01 08:29	
				ELIG 1	
CASE NAME: BUNDY, PEG		CASE NUMBER: 0000B005 MONTH: AUG02			
HH SIZE: 04		TRANSITIONAL MEDICAL IN: 08			
		APR	MAY	JUN	
GOOD CAUSE/NO EARNINGS	:	N	N	N	
EMPLOYMENT INCOME	:	4000.00	4000.00	4000.00	
SELF-EMPLOYMENT INCOME	:	0.00	0.00	0.00	
			AVERAGE EARNED INCOME	:	4000.00
DEPENDENT CARE DEDUCTION		0.00	0.00	0.00	
			AVERAGE DEPENDENT CARE	:	0.00
MAXIMUM NET INCOME					: 4000.00
MAXIMUM INCOME LIMIT					: 2722.00
BENEFIT AUTHORIZATION:					BUS PASS: N
ISS REASON: RE ISS INDICATOR: <u>NO</u>					PAYEE SETUP REQ: <u>N</u>
HOLD REASON:					
HOLD REMINDER DATE: _____					
NOT ELIGIBLE - SEE ELIGIBILITY DETERMINATION SCREEN					NEXT--> _____
48	1 DWS	204.113.16.53	TA1709	S	

The FMTR shows the current income posted on the retrospective screens.

This screen is showing the income posted on the retrospective screens for April, May, and June.

We now need to process the quarterly report and post the actual income reported in April, May, and June.

FMTR

TRANSITIONAL MEDICAL INCOME ELIGIBILITY 24AUG01 08:29

ELIG 1

CASE NAME: BUNDY, PEG

CASE NUMBER: 00008005 MONTH: AUG02

HH SIZE: 04

TRANSITIONAL MEDICAL IN: 08

	APR	MAY	JUN
GOOD CAUSE/NO EARNINGS :	<u>N</u>	<u>N</u>	<u>N</u>
EMPLOYMENT INCOME :	<u>X</u> 4000.00	4000.00	4000.00
SELF-EMPLOYMENT INCOME :	0.00	0.00	0.00
		AVERAGE EARNED INCOME :	4000.00
DEPENDENT CARE DEDUCTION :	0.00	0.00	0.00
		AVERAGE DEPENDENT CARE :	0.00

MAXIMUM NET INCOME : 4000.00

MAXIMUM INCOME LIMIT : 2722.00

BUS PASS: N

BENEFIT AUTHORIZATION:

ISS REASON: RE ISS INDICATOR: MO

PAYEE SETUP REQ: N

HOLD REASON:

HOLD REMINDER DATE: _____

NOT ELIGIBLE - SEE ELIGIBILITY DETERMINATION SCREEN

NEXT--> _____

48

1 DWS

204.113.16.53

TA1709

S

To post, April, May, and June income, we must post each month's income individually

To enter the income, enter an "X" in the Employment field for the month you wish to post.

To post April income:

Type an "X" under the Employment income field for April

Press Enter

EAIN		EARNED INCOME				24AUG01 08:34					
		RETROSPECTIVE				ELIG 1					
CASE NAME: BUNDY, PEG						CASE NUMBER: 00008005 MONTH: JUN02					
NAME	RELN	S	W	T	SUB	MONTHLY	MONTHLY	ABD	W	CHP	CAAL
		C			LS	AMOUNT	HOURS	AMOUNT	S	AMT	VR
				P							DATE
01 PEG	B PI			WA		TOTAL: 800	80	0.00		0.00	BE
						TOTAL:					
						TOTAL:					
02 KELLY	B CH					TOTAL:					
						TOTAL:					
						TOTAL:					
03 BUD	B CH					TOTAL:					
						TOTAL:					
						TOTAL:					
04 UNBOR	B UB					TOTAL:					
						TOTAL:					
						TOTAL:					

MORE INCOME:	MORE CLIENTS:	RETROSPECTIVE:	NEXT-->
40	1 DWS	204.113.16.53	TA1709 #

The customer reported \$800 earnings in April.
Post it next to the person earning the income.

(This is posted in the Benefit Month of June on the Retrospective screen.)

Press Enter and PACMIS will go to FMTR. The expenses for April need to be posted.

```

FMTR                                TRANSITIONAL MEDICAL INCOME ELIGIBILITY 24AUG01 08:49
                                     ELIG 1
CASE NAME: BUNDY, PEG                CASE NUMBER: 00008005 MONTH: AUG02
HH SIZE: 04                          TRANSITIONAL MEDICAL IN: 08
                                     APR      MAY      JUN
GOOD CAUSE/NO EARNINGS : N          N          Y
EMPLOYMENT INCOME      : -      800.00 -      4000.00 -      4000.00
SELF-EMPLOYMENT INCOME : -      0.00 -      0.00 -      0.00
                                     AVERAGE EARNED INCOME :      2933.33
DEPENDENT CARE DEDUCTION : X      0.00 ■      0.00 -      0.00
                                     AVERAGE DEPENDENT CARE :      0.00
                                     MAXIMUM NET INCOME      :      2933.33
                                     MAXIMUM INCOME LIMIT   :      2722.00
                                     BUS PASS: N
BENEFIT AUTHORIZATION:
ISS REASON: RE ISS INDICATOR: MO    PAYEE SETUP REQ: N
HOLD REASON: _____
HOLD REMINDER DATE: _____
NOT ELIGIBLE - SEE ELIGIBILITY DETERMINATION SCREEN      NEXT--> _____
4A 1 DWS      204.113.16.53      TA1709      S

```

Peg also reported that she paid \$100 for child care expenses paid in April.

Place an X next to the Dependent Care Deduction for April. Press Enter to post the child care expenses.

EXPE

EXPENSE
RETROSPECTIVE

24AUG01 08:51

ELIG 1

CASE NAME: BUNDY, PEG

CASE NUMBER: 00008005 MONTH: JUN02

	NAME	REL	W S	TY	SUB	MONTHLY AMOUNT	ABD AMOUNT	VR	CAAL DATE
01	PEG	B	PI	-	-	-	-	-	-
02	KELLY B	CH	-	-	-	-	-	-	-
03	BUD	B	CH	-	-	-	-	-	-
04	UNBOR B	UB	-	-	-	-	-	-	-

MORE EXPENSES: _

MORE CLIENTS: _

RETROSPECTIVE: _

NEXT--> _

4A

1 DWS

204.113.16.53

TA1709

S

Post the child care expenses of \$100 next to the child who the child care is paid for.
The subtype is the person paying the expense.

(This is posted on the June Retrospective screen.)

Press Enter to go back to FMTR.

FMTR		TRANSITIONAL MEDICAL INCOME ELIGIBILITY		24AUG01 08:52	
				ELIG 1	
CASE NAME: BUNDY, PEG		CASE NUMBER: 00008005 MONTH: AUG02			
HH SIZE: 04		TRANSITIONAL MEDICAL IN: 08			
		APR	MAY	JUN	
GOOD CAUSE/NO EARNINGS :	N	N		Y	
EMPLOYMENT INCOME :	-	800.00	X 4000.00		4000.00
SELF-EMPLOYMENT INCOME :	-	0.00	0.00	-	0.00
		AVERAGE EARNED INCOME :			2933.33
DEPENDENT CARE DEDUCTION :	-	100.00	0.00	-	0.00
		AVERAGE DEPENDENT CARE :			33.33
MAXIMUM NET INCOME :					2900.00
MAXIMUM INCOME LIMIT :					2722.00
BENEFIT AUTHORIZATION:					BUS PASS: N
ISS REASON: RE ISS INDICATOR: MO					PAYEE SETUP REQ: N
HOLD REASON: _____					
HOLD REMINDER DATE: _____					
NOT ELIGIBLE - SEE ELIGIBILITY DETERMINATION SCREEN					NEXT--> _____
40	1 DWS	204.113.16.53	TA1709	S	

The FMTR screen now shows the Employment and Child Care expenses paid in April.

To post May's income:

Place an "X" in the Employment Income field for May

Press Enter

EAIN		EARNED INCOME				24AUG01 08:42					
		RETROSPECTIVE				ELIG 1					
CASE NAME: BUNDY, PEG				CASE NUMBER: 00008005				MONTH: JUL02			
NAME	RELN	S	W	T	SUB	MONTHLY	MONTHLY	ABD	W	CHP	CARL
		S	Y	TYP	LS	AMOUNT	HOURS	AMOUNT	S	AMT	VR
		C		P							DATE
01	PEG	B	PI		WA	TOTAL: 300	60	0.00		0.00	BE
						TOTAL:					
02	KELLY	B	CH			TOTAL:					
						TOTAL:					
03	BUD	B	CH			TOTAL:					
						TOTAL:					
04	UNBOR	B	UB			TOTAL:					
						TOTAL:					
						TOTAL:					
						TOTAL:					

MORE INCOME: _	MORE CLIENTS: _	RETROSPECTIVE: _	NEXT--> _
4A	1 DWS	204.113.16.53	TA1709 #

The customer reported \$300 earnings in May.

(This has been posted on the Retrospective screen for July 02.)

Press Enter and PACMIS will go to the FMTR screen so the May's child care expenses can be posted.

EXPE

EXPENSE
RETROSPECTIVE

24AUG01 09:06

ELIG 1

CASE NAME: BUNDY, PEG

CASE NUMBER: 00008005 MONTH: JUL02

	NAME	REL	W S	TY	SUB	MONTHLY AMOUNT	ABD AMOUNT	VR	CARL DATE
01	PEG	B	PI	—	—	—	—	—	—
				—	—	—	—	—	—
02	KELLY B	CH	—	—	—	—	—	—	—
				—	—	—	—	—	—
03	BUD	B	CH	—	—	—	—	—	—
				—	—	—	—	—	—
04	UNBOR B	UB	—	—	—	—	—	—	—
				—	—	—	—	—	—
				—	—	—	—	—	—
				—	—	—	—	—	—

MORE EXPENSES: _

MORE CLIENTS: _

RETROSPECTIVE: _

NEXT--> _

40

1 DWS

204.113.16.53

TA1709

S

To post May's child care expenses, put an "X" next to the Dependent Care Deduction field for May.

Press Enter to go to EXPE.

EXPE		EXPENSE RETROSPECTIVE				24AUG01 09:06 ELIG 1			
CASE NAME: BUNDY, PEG				CASE NUMBER: 00008005 MONTH: JUL02					
	NAME	REL	W S	TY	SUB	MONTHLY AMOUNT	ABD AMOUNT	VR	CARL DATE
01	PEG	B	PI	-	-	-	-	-	-
				-	-	-	-	-	-
02	KELLY	B	CH	-	-	-	-	-	-
				-	-	-	-	-	-
03	BUD	B	CH	-	-	-	-	-	-
				-	-	-	-	-	-
04	UNBOR	B	UB	-	-	-	-	-	-
				-	-	-	-	-	-
				-	-	-	-	-	-
				-	-	-	-	-	-

MORE EXPENSES: _	MORE CLIENTS: _	RETROSPECTIVE: _	NEXT--> _
1 DWS	204.113.16.53	TA1709	\$

Post the reported child care expenses of \$25.

Press Enter to return to FMTR

FMTR	TRANSITIONAL MEDICAL INCOME ELIGIBILITY			24AUG01 09:14
				ELIG 1
CASE NAME: BUNDY, PEG	CASE NUMBER: 00008005			MONTH: AUG02
HH SIZE: 04	TRANSITIONAL MEDICAL IN: 08			
	APR	MAY	JUN	
GOOD CAUSE/NO EARNINGS : <u>N</u>	<u>N</u>	<u>Y</u>	<u>Y</u>	
EMPLOYMENT INCOME : -	800.00	300.00	4000.00	
SELF-EMPLOYMENT INCOME : -	0.00	0.00	0.00	
		AVERAGE EARNED INCOME :	1700.00	
DEPENDENT CARE DEDUCTION : -	100.00	25.00	0.00	
		AVERAGE DEPENDENT CARE :	41.66	
		MAXIMUM NET INCOME :	1658.34	
		MAXIMUM INCOME LIMIT :	2722.00	
BENEFIT AUTHORIZATION: _____		BUS PASS: <u>N</u>		
ISS REASON: RE ISS INDICATOR: <u>MO</u>		PAYEE SETUP REQ: <u>N</u>		
HOLD REASON: _____				
HOLD REMINDER DATE: _____				
IS ELIGIBLE - AUTHORIZATION REQUIRED			NEXT--> _____	
40	1 DWS	204.113.16.53	TA1709	S

To post the June income:

Type an X in the Employment Income field for June.

However, in June, the customer reported that she did not work because she was ill.

EAIN		EARNED INCOME				24AUG01 09:19					
		RETROSPECTIVE				ELIG 1					
CASE NAME: BUNDY, PEG						CASE NUMBER: 00008005 MONTH: AUG02					
NAME	RELN	S	W	T	SUB	MONTHLY	MONTHLY	ABD	W	CHP	CAAL
						AMOUNT	HOURS	AMOUNT	S	AMT	DATE
		C		P							
01	PEG	B	PI			TOTAL:					
						TOTAL:					
						TOTAL:					
02	KELLY	B	CH			TOTAL:					
						TOTAL:					
						TOTAL:					
03	BUD	B	CH			TOTAL:					
						TOTAL:					
						TOTAL:					
04	UNBOR	B	UB			TOTAL:					
						TOTAL:					
						TOTAL:					

MORE INCOME:	MORE CLIENTS:	RETROSPECTIVE:	NEXT-->
4A	1 DWS	204.113.16.53	TA1709

On EAIN, remove all earned income.

This is on the Retrospective screen for the benefit month of August.

Press Enter to return to FMTR.

On FMTR, there is no earned income posted for June.

FMTR	TRANSITIONAL MEDICAL INCOME ELIGIBILITY			24AUG01 09:20
				ELIG 1
CASE NAME: BUNDY, PEG	CASE NUMBER: 00008005			MONTH: AUG02
HH SIZE: 04	TRANSITIONAL MEDICAL IN: 08			
	APR	MAY	JUN	
GOOD CAUSE/NO EARNINGS :	N	N	Y	
EMPLOYMENT INCOME :	800.00	300.00	0.00	
SELF-EMPLOYMENT INCOME :	0.00	0.00	0.00	
		AVERAGE EARNED INCOME :		366.66
DEPENDENT CARE DEDUCTION :	100.00	25.00	0.00	
		AVERAGE DEPENDENT CARE :		41.66
		MAXIMUM NET INCOME :		325.00
		MAXIMUM INCOME LIMIT :		2722.00
BENEFIT AUTHORIZATION: 1111		BUS PASS: N		
ISS REASON: RE ISS INDICATOR: MO		PAYEE SETUP REQ: N		
HOLD REASON: _____				
HOLD REMINDER DATE: _____				
IS ELIGIBLE - AUTHORIZATION REQUIRED				NEXT-->
4A	1 DWS	204.113.16.53	TA1709	S

The Good Cause/No Earnings field defaults to N.

As long as there is good cause for no earnings, keep the Y.

Authorize benefits.

If the customer does not have good cause for not having earnings, enter an N to indicate no good cause.

If there is no good cause, the household is no longer eligible for FMTR. PACMIS will fail the case due to earnings.

Note: After processing a quarterly report, PACMIS will change the budgeting method to Retrospective (R). Be sure to change the budgeting method back to Prospective (P).

FM-O? FM-OO? FM-12?

Question 1:

For the last year Ms. Richards has been receiving FEP for herself and 2 children because she and her husband are separated.

Her husband has now returned to the home. He works full time and based on his earnings, the household is not eligible for FEP or FEP-TP.

Is the household eligible for any extended Medical programs?

What if his earnings are over 185% of Poverty?

Question 2:

Ms. Adams has been receiving FEP for herself and daughter for the last four months because she is divorced from her husband.

She is now working. The best estimate of her anticipated wages is \$2064 per month (\$12 per hour x 40 hours x 4.3 = \$2064). Based on these wages she is no longer eligible for FEP. The 185% of Poverty limit is \$1841 (2002).

Is the household eligible for any extended Medical programs?

Question 3

Mrs. Farley has been receiving FM-OO for herself and children because the household was not longer eligible for FEP because her earnings were too high.

She has now received 6 months of the FM-OO.

When processing her review, we find that her earned income is over the 185% of Poverty.

What action do we take now?

Question 4:

Mrs. Martinez has been receiving the FM-OO Medicaid for herself and 2 children for the last 12 months.

Now what do we do?

Question 5

Mrs. Johnson has been receiving FM-O for herself and five children for the last 6 months because she and her husband separated.

He has now returned to the home. He works full time. Counting his income, they still meet the income criteria for FM-O.

What action do we take?

Question 6:

Mrs. Cleaver is receiving FM-O for herself and two young children.

In July she reported two changes:

1. She got a job.
2. Her child support has now increased

Using the new job and new child support, they are not eligible for FM-O.

Using only the new child support (not the earned income) she would be eligible for FM-O.

What extended Medical program would the household be eligible for?

Question 1 Answer - Ms. Richards:

- FM-O Not eligible because the children are not deprived of parental support.
- FM-OO Not eligible because the children are not deprived of parental support.
- FM-12 Eligible because:
- 4 The father's earnings were a factor in causing the case to close.
 - 4 They received FEP in 3 of the last 6 months.
 - 4 Earnings of a parent played a role in the closure
 - 4 They are not eligible for FM-O or FM-OO because the children are not deprived of parental support.
 - 4 FM-12 does not have the policy that says that the household must be under 185% of Poverty to get the first 6 months of Medicaid.

The household (including Mr. Richards) can be included in the FM-12.

Closure code: TR Closure notice: FCTR

Question 2 Answer - Ms. Adams:

- FM-O or FM-OO: Not eligible because:
- 4 Her earnings must be below 185% of Poverty.
 - 4 Her earnings are over 185% of Poverty so she does not meet this criteria.
(She meets the criteria of deprivation of support of the child.)

- FM-12: Eligible because:
- 4 She has receive FEP in 3 of the last 6 months
 - 4 Earnings of the parent caused the case to close.

Closure code: TR Closure notice: MCTR

Question 3 Answer - Ms. Farley:

1. Close the FM-OO because she is not eligible because her earned income is over 185% of poverty.
2. Open FM-12 because:
 - A. She is no longer eligible for FM-OO because the earnings of a parent are over 185% of Poverty, and
 - B. She does not qualify for FM-O because her earnings (parent) are too high.

Closure code: TR
Closure notice: MCTR

Question 4 Answer - Mrs. Martinez

1. Determine if she is eligible for FM-O.
 - A. If eligible, open FM-O
 - B. If not eligible because of her earned income is too high, open FM-12.

Question 5 Answer - Mrs. Johnson

1. The household is no longer eligible for FM-O because the children are not deprived of parental support (Mr. Johnson works more than 100 hours per week).
2. Close the FM-O using TR as the closure code and send MCTR notice.
3. Open FM-12 and include all household members (including Mr. Johnson)

Question 6 Answer - Ms. Cleaver

The household would be eligible for FM-OO Medicaid because:

- A. Earned income played a role in the closure of FM-O (Because she was eligible for FM-O using the child support only, but is not eligible using the child support **and** earned income, the earned income played a role in the FM-O closure.)
- B. Child is still deprived of parental support.